JOURNAL MISSOURI STATE MEDICAL ASSOCIATION

Volume II JANUARY, 1906 Number 7

ORIGINAL ARTICLES

TEN YEARS' EXPERIENCE WITH THURE BRANDT'S MASSAGE IN THE TREATMENT OF CHRONIC DISORDERS OF THE FEMALE GENITAL ORGANS.*

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In 1893, last September twelve years ago, I was admitted as a pupil in Major Thure Brandt's private sanitorium for gymnastics and massage, at Stockholm, Sweden. There were about a dozen patients coming daily for treatment, some of whom refused my presence at the sittings, others permitted me to be present while others, moved by altruistic sentiments, allowed me to examine and massage under the supervision of the Major. Whenever I was present at the sittings the Major would outline the whole course of treatment, give the anatomical diagnosis, explain the different massage movements and give the reason why a certain movement had to be made in a certain way and in no other. After leaving Stockholm, I applied, on the advice of Thure Brandt, for admission into Dr. Theodore Landem's Gynecological Polyclinic at Berlin, Germany. While there I was given ample opportunity to massage such cases as were considered likely to be benefitted. Ever since the year 1890, when I resumed practice, hardly a day has passed that I had not one or the other under treatment.

Almost one of the first cases that I had to treat was one of prolapsus vaginae et decensus uteri retroflexi. Several gynecologists have doubted the possibility of such cases being permanently cured by Thure Brandt's method. During my conversation with the Major on the different degrees of prolapsus I learned that he felt very sore at having been mistrusted about the care of such cases. He told me many a time, that he had invited, in the beginning of his career, some of the gynecologists of Stockholm to investigate and control his method, but

*Read before the St. Louis Medical Society, November 18, 1905.

none, save one, had responded.

In the year 1886 Dr. Paul Trofanter, who was sent by Mr. Robert Nobel to investigate his method, prevailed upon the Major to present his method to Professor Schulze, of Jena. Thure Brandt, accompanied by Dr. Nissen, treated several cases under the constant control of the professor. The profession seemed to take interest in the method for some time, but, alas! classical methods, "ventro-fixation, vagino-fixation, Alexander's operation," etc., have swept away the nascent interest in Thure Brant and his system.

If you present to your mind the anatomy of the suspensory system and its finer histological details, consider the functions of the different structures which compose the whole suspensory apparatus, recapitulate the different ways of massage and gymnastics employed in such cases, I do not think you will have much difficulty to understand that a cure is not alone possible, but perfectly rational.

The only difficulty in the execution of the "uterus lifting" consists in the retaining of the organ in the normal position during the lifting. If the uterus slips back during the procedure into the abnormal position you do more harm than good. It has happened to me several times, but after a few trials I succeeded all right.

The most common forms of abnormalities met with in the female pelvis is malposition of the uterus et adnexa. As long as a retroverted or retroflexed uterus does not manifestly cause any trouble or annoyance I take it for a normal organ, or better, an abnormally normal one. Those that cause trouble may be divided into movable and fixed malposition. I would advise you never to stick to a once-formed diagnosis of a movable or fixed organ even after repeated examinations, not even after successfully replacing the organ by sound or under anesthesia. I have on several occasions treated by massage retroflexions which seemed to all appearances firmly fixed. Every attempt at anteflexion failed. Then after a varied period of massage, having reduced the hypertrophy of the organ, having removed all inflammatory deposits that I could detect in the neighboring parts, I succeeded one morning quite easily in reducing the organ. Sometimes the uterus will remain in the normal position after you have replaced it for several mornings; at other times you find it every morning again in the retroposition. For this latter incident I have found several reasons. First of all a hard induration in the corpo-cervical angle; patient massage will cure this. Sometimes you find the organ for several days in normal position; all at once it has slipped back again. If I can reduce the uterus without any difficulty, well and good, but the moment I find any resistance I desist, use calming massage and wait till

the next morning. To my surprise I find it sometimes next day again in normal position; if not I try again, look for the cause of the accident and endeavor to remove it. In most cases I hear of hard work the previous day, washing, ironing, scrubbing, etc. Sometimes I cannot find any reason.

Another cause of the slipping back of the uterus is shortening of the sacro-uterine ligament, laxness of round ligaments, etc. Where the round ligaments and other parts are too lax to hold the uterus in normal position, their functions having been reduced by non-use, their muscular fibers wasted by want of exercise, the method of massage which restores tone and function, supplemented by uterus lifting and gymnastics will effect a cure.

In the beginning of my career I made the mistake of stretching the sacro-uterine ligaments too much and letting them slip back suddenly; purposely at times but at others they would slip off my finger. Under these conditions harm will follow. The uterus is then sometimes found so firmly fastened into the pelvic cavity as to impose a fixed retroflexion. As soon as I learned my mistake and altered my ways this seldom happened. I massage gently, stretch the ligaments to a certain point, taught by previous experience, and let them slip back gradually. In some cases I never succeeded in retaining the organ in the normal position. Small and very thin adhesions are said to be the cause in some instances, in others you find a thickening and shortening of the retroperitoneal covering of the uterus as responsible for this condition. As these cases, when previously treated by massage, do not cause gross inconvenience, patients are perfectly satisfied with results obtained.

The fixed retroflexions are sometimes hard to cure. It is almost always a tedious task but they are very grateful subjects for massage. Many a time did I have for treatment women, who before they came to me, were complete wrecks, unable to attend to their household duties, not a day without suffering. After a few months of treatment they were perfectly capable to resume the hardest work of the household, take in washing and ironing, although the uterus remained in the malposition. But at this time every trace of inflammatory induration in and around the uterus had disappeared, the uterus, although not completely free and loose, was sufficiently movable to follow all necessary intra- abdominal displacement. A retroflexion is no disease *ipso facto*, does not cause, as such, any trouble notwithstanding what the text books say. All operations without previously restoring parts to their normal conditions, are unscientific and bound to meet with failure, exceptions granted.

I spoke just now about inflammatory indurations and hardenings.

There are some places of predilection. The corpo-cervical angle is a most likely place. Here I have found at times an extreme degree of sensitiveness and pain. If you do not commence massage very, very carefully your patient will not come again. I begin with about one-half minute's massage round the most sensitive area, go slowly on and I am almost always surprised how rapid the progress of such cases is. Other places of induration are, base of the ligamentum latum, ligamentum utero-ovaricum, the surrounding of a displaced ovary or tube. In all these cases I had to learn not to do too much at the start, but even now I make mistakes; every case is a study in itself. The longer I massage my cases the more I sometimes find to massage. Small indurations which slipped my observation are detected after weeks of massage and certain symptoms that resisted up to then all treatment, rapidly disappear. Very resistant to treatment were those deposits I found in the ligamentum utero-ovaricum. Patience on both sides is necessary in almost every case of this kind.

During the International Medical Congress at Paris in 1900, I learned during a casual conversation, of an affection which I have met with several times since, viz., the effects of coitus interruptus and other practices. I do not refer to the deleterious influences of these practices on the nervous system of the sensitive and sensual woman. I will just draw your attention to the results they have on the sexual organs.

Examine a newly married woman and you will find that in the beginning of such practice, the want of the orgasm experienced time after time will cause a very painful contraction of the ligamenta sacro-uterina. If this practice is kept up for any length of time you will find an induration of the corpus uteri and also a straightening of the corpo-cervical angle, the whole organ in retroflection. I have at present one of the latter category under my care and the progress I have made so far in about four weeks of treatment is discouraging. If you can convince them that "*cessante cause, cessat effectus*," everything will return to normal in a short while. In the more chronic forms massage has to treat the induration. But as this practice is kept up in most cases its results do not disappear completely

One of the most common complaints of the married as well as unmarried woman is dysmenorrhoea, taking this word in its largest application. Here again I must put myself in opposition to some of the text books. I do not believe that in most cases the cause is a mechanical one. It takes, sometimes, a careful search to find the cause of this annoyance, to say the least of it. In a young girl with an intact hymen I found a descended and walled-in ovarium as the cause of the trouble. The dysmenorrhoea was accompanied in this case with an almost incessant

desire to urinate. Massage per rectum—I always examine girls with an intact hymen per rectum and massage also per rectum—massage I said, was very distressing in the beginning causing contraction of the abdominal muscles. In other cases I found induration in corpori uteri, sometimes in corpo-cervical angle, sometimes in the tubes, etc. Most cases taxed the patience of both of us before a cure was perfected. I do not refer here to cases of dysmenorrhoea which you can relieve by administration of internal medicines, but to those only that resist your therapeusis and demand an examination.

You find cases of dysmenorrhoea where the pain commences hours before the flow appears; there are others where the pain is not felt till twenty-four or forty-eight hours after the onset. Sometimes girls are free from all inconvenience before or during their menses, but a few months after being married complain for the first time. Since I have practiced Thure Brandt's method I never resorted to instrumental interference. My results are very satisfactory, a fact in most cases unexplainable if a mechanical obstruction were the cause of this trouble. I can assure you it takes often a repeated examination supplemented by massage before the cause of the trouble is detected. *Ou est le gonococcus?*

Giving birth to a child will sometimes cause incontinentia urinæ. Where the cause is a paresis of the sphincter vesicæ the Thure Brandt method will often quickly cure this annoyance. In one case my results were lacking in efficiency. I questioned the woman several times, got suspicious, made an ocular examination and found a vesico- vaginal fistula. Dr. Bernays operated on the case with perfect result. My experience in gonorrhoic affections has been very discouraging. Sometimes I commenced too early and the cases would go from bad to worse; at other times the progress made was so slow, the improvement in subjective conditions, even after weeks of massage, so slight that the patients left off coming. My last case seems more promising. Three years before last attack had acute pyosalpinx of right side which perforated into intestinal tract before it had come down far enough into Douglass' cul-de-sac to permit of safe opening. The last attack was on the left side. A few days afterwards there appeared a gonorrhoeal arthritis of the right knee which was easily cured by Bier's constriction hyperaemia. A day or two before menses appeared the pyosalpinx discharged per uterum. The progress is more than satisfactory.

Although I have made it my practice to observe the expression of my patient during massage I have met with accidents. You will find patients who will make a face on the slightest unpleasant sensation and cry out about awful pain. If you are taken by these your work will

not be satisfactory. There are, however, others who, from the mistaken idea that the greater the pain the better the results, or the like, hide their suffering and induce you to massage more vigorously than you ought to. The result is often an exacerbation of the infiltration and exudation at the seat of the trouble. If necessary I keep these cases in bed two or three days, commence then again very slowly. A few sittings generally suffice to have the exudation resorbed. Another cause of such accidents are brisk walks, climbing steps, car riding, too heavy work, etc.

The average sufferer from female troubles complains of symptoms amongst which headache, backache, pain down along the thighs, flatulence, dyspepsia, constipation, etc., return with a remarkable obstinacy. As long as these are dependent upon a detected anatomical lesion, pressure exercised in *loco lesionis* will elicit the symptom. I could often produce in this way a remote neuralgia, nausea, severe pain in back or around the crista ilii, etc. Of all the symptoms which disappear the soonest after massage is started, headache and constipation are the first. There are, however, cases of headache where I do not find even after months of massage any anatomical foundation. Some of these headaches disappear with each pregnancy, to reappear sooner or later after the birth. In one case of about eleven years standing it took months and months of patient massage, but once cured she remained cured. The alteration that has taken place in the woman is simply astonishing.

In all such cases where I could not detect any cause for the trouble I followed a general depletory massage. Although I do not believe in the unrestricted and unfounded application of the term "autoinfection," I think we are entitled to apply this term like the above. That I do not find any anatomical lesion does not prove that there does not exist any such lesion; on the contrary a cure effected by massage proves the anatomical foundation for those headaches. That pathological tissue liberates chemical products which cause alterations of mostly subjective nature was proved to me again a few days ago. A woman with gonorrhoic affection whom I had massaged for a short while only, experienced a most decided depression besides the reappearing of constipation, while I was obliged to leave off massage for four days. Two days after recommencing she voluntarily stated that she felt well again. That the constipation was not the cause of the depression is proved by the fact that she was free from the latter during the treatment although constipated for a day or two sometimes.

Constipation dependent upon any female trouble will soon disappear after massage has commenced. No special method for massage is necessary. In those cases, however, of

idiopathic constipation a proper form of massage has to be instituted. If this form were applied to any kind of genital lesion it might do harm.

Since the creation of the term "autointoxication" another appeared on the scene, viz: habitas asthenicus, formerly called habitas paralyticus. A very interesting case of this kind was under my care some years ago. When I saw the girl first, then about eleven years old, she was unable to walk the distance of a few rooms. General massage of the whole body supplemented by graduated gymnastic exercises and the special massage of genital organs which were fully developed, soon improved the girl's condition. After a few months of treatment I left the city. October, 1905, about seven years after I saw her last, I heard from her. She is still in delicate health but not phthisical. In some cases where I did not meet with satisfactory progress, I proposed as indicated by Dr. Nissen and accepted by Thure Brandt, to continue massage during menses. Where the patients consented I was pleased with the results obtained. Infiltration, indurations, etc., which have resisted your best efforts, will soften and decrease during this period. The only incident I met with was the appearance of an urticaria-like eruption which did not much inconvenience the patient and disappeared with the cessation of the menses.

I would like to draw your attention to one circumstance which has sometimes forced me to abandon massage, namely, car riding. Patients who had made good progress as long as they could get to my office on foot, failed to make any headway the moment they had to take a long car ride to my office. This I noticed especially in those who had lately come under treatment. After a certain improvement had taken place some were not affected, others had to abandon the treatment. Thure Brandt advised all his patients to walk to his office.

Several times I have been asked whether massage does not excite any erotic feelings. I follow the rule to mention this point to my patients the first time I treat them. I follow, furthermore, implicitly the rule of Thure Brandt for massage and this incident never happened to me as far as I am aware of.

Permit me to refer briefly to a paper read by Dr. A. R. Kieffer before the Missouri State Medical Association, Excelsior Springs, May, 1905.

As the paper deals with almost the same subject as mine of tonight, I feel very grateful to the author for having drawn such prominent attention to the anatomical and histological details of the contents of the female pelvis. Very properly is the introductory remark: "The whole subject of uterine displacements is predicated upon a knowledge of the normal anatomical support of the uterus and their several functions." The basis and rationale of Thure Brandt's method is a thorough

knowledge of the anatomy and histology of the female pelvis, a good understanding of the physiological functions of the suspensory ligaments, etc. The aim and purpose of the whole method is to restore the normal anatomical structure of the different organs, to enable the suspensory ligaments, etc., to resume their physiological functions, to strengthen the muscular apparatus, which completes, in one way or the other the whole system of the female pelvis. Now, I would ask you how an Alexander operation can restore "the whole apparatus in cases where the uterus is usually more or less undeveloped?" where "there is a general laxness of the structures forming the upper system of the support with the exception of the vesico-vaginal ligament. And as might be guessed this degree of laxness affects the ligaments in a ratio of their correspondence to the uterus in structure. The round ligaments being practically identical histologically are extremely lax." This strong and muscular ligament is partially cut, the remnant sewed to the abdominal wall, and then the whole suspensory apparatus as well as this crippled ligament have to restore their lost functions as best they can, by what means I would ask can they do so after, but not before the Alexander? By what means will the undeveloped uterus assume its normal condition after the operation if it could not do so before?

These are the very cases where Thure Brandt's method will do wonders.

I feel obliged to most emphatically contradict another statement of the author, basing my objection on many, many cases treated, viz.: "Retrodeviation with adhesions requiring attention cannot be dealt with without opening the peritoneal cavity." How many cases of this kind I have treated I do not remember, but they form the majority in my experience, and these cause the most suffering, as those most of all incapacitate the women from work, they were selected by me in preference to others. Many a case has been perfectly cured, others were so far benefitted that they asked permission to discontinue treatment, although the uterus was not yet in perfectly normal condition. But all induration had disappeared, all unpleasant symptoms had gone, they felt as well as ever; one hour or two every day, or even every other day is a great loss to a woman who has to earn her living by hard work, or has a crowd of children to attend to.

I was astonished to read another statement, viz.: The commonest cause of such a state of subinvolution—subinvolution of the uterus and suspensory ligaments—is laceration of the cervix.

Ten years ago Emmet's operation was considered almost a "cure all," for the female sufferer; it meant at one time a mint of money to its able advocate. Examine your patients who have had children, how many do

you find with an intact cervix?

For years and years past I have considered a tear in the cervix as something incidental. The laceration, which persists, is not the cause of subinvolution. Remove by massage the old inflammatory deposits, soften cicatrical tissue, etc., and you will find that you have cured your patient, although she is still the happy possessor of a lesion entitling her to an Emmet.

If I have succeeded in directing your attention to this most effective method of treating a variety of female troubles I consider I have acquited myself of some of my indebtedness towards its originator, the late Major Thure Brandt:

DISCUSSION.

Dr. F. J. Taussig said that many would agree with Dr. Ross as to the benefits to be obtained from massage where there was some objective lesion, such as a parametritic exudate or some adhesion that could be broken up. But regarding cases of dysmenorrhoea in which there were no objective findings, he had made the statement that, because these patients got well under massage, therefore the result was due to the massage., That conclusion did not necessarily follow for there was undoubtedly in these nervous women a susceptibility to suggestion and the massage for a long time might produce the effect on the nervous system in that way. In regard to parametritis with cervical laceration, Dr. Kieffer's idea of the mode of infection was the one usually accepted; as a result of the infection, there is an infiltration of the broad ligament. But when the cervical tear is sewn up, the exudate is not affected, so that the mere sewing up of the cervix could not be the cause of any direct improvement in the exudate.

Dr. B. L. Dorsey asked how long after an attack of gonorrhoea would Dr. Ross introduce this massage. He had known cases of infection in which twelve months later there was a tube development. And it should be remembered, too, that not even under an anesthetic was it possible always to determine the exact size of the tube. It was the same as in cystic ovaries. At an operation one sometimes found the ovary large yet before opening the abdomen it had been impossible to determine that fact.

Dr. George Gellhorn stated that Thure Brandt's treatment was a subject which deserved our earnest consideration. He had had a good opportunity of studying this method. Brandt went to Jena in 1886 to demonstrate his method of massaging to Prof. B. S. Schultze. He massaged fifteen cases. Dr. Gellhorn did not recall the diagnosis in each case but he knew that as late as 1895 the majority of these cases had remained well. The method had been in use in the university clinic of Jena ever since, and in 1898, when Dr. Gellhorn had become assistant there, he had learned to do the massage treatment, and how to select

the cases. Brandt's method was endorsed in Germany by Schultze and in Austria by Schauta. Of late, however, more reliable and less laborious methods of treatment for certain affections of the female genital organs had limited the usefulness of Brandt's method and today it should be used only in a certain well-defined class of cases. While he agreed with many of the sentiments expressed by Dr. Ross, the speaker differed with him in that he would not advise this massage for all affections of the female organs. It was mainly chronic inflammatory conditions in which massage was indicated. In metritis, to begin with, there were three stages, the acute, sub-acute and chronic. In the acute and sub-acute stages the uterus is swollen and edematous. If this condition is not interfered with the edema is slowly absorbed and fibrous tissue formed, and finally the uterus becomes very hard and heavy. In this stage no treatment would avail; it is simply an incurable condition. The second stage, that of sub-acute metritis, is the great field of usefulness for massage. Properly administered it would remove by depletion the excessive amount of fluid between the muscle fibers of the uterus, and by improving the circulation within the organ it would bring about a restoration of the organ to its proper size. It is true that metritis is very often in a certain relationship with laceration of the cervix. When in childbirth such a laceration occurs and the interstitial spaces are opened, the ever-present infection can gain an entrance into the tissue both of the uterus and the parametrium and set up an inflammation. Consequently infection can be prevented by keeping the vagina clean. In other words, after a delivery in which these lacerations were suspected or actually detected, antiseptic douches should be employed and the subinvolution of the uterus would not fail to occur. How the later sewing up of this tear would cure the subinvolution he could not understand. In fact, Dr. Kieffer had stated that after sewing up the tear, he still had to resort to other treatment, such as hot douches.

Chronic inflammatory conditions of the Fallopian tubes and the ovaries also were conditions very suitable for the massage treatment. In salpingitis where a pyosalpinx had not yet been formed there was the swollen tube in which circulation was impaired. Here massage movements toward the periphery would remove the venous congestion and bring about a restoration of the affected parts. The effects of Thure Brandt's method were very notable in perioophoritis, in which the ovaries were very sensitive to the touch. This sensitiveness was brought about first by adhesions due to the swelling of the organ beneath the peritoneal covering, second, the inflammation which had affected the organs would affect the peritoneum itself and bring about a localized peritonitis. In such cases Brandt's method would be very efficacious, but

this alone would not effect a cure. It must be combined with other non-surgical procedures, of which there were many. There was the prolonged hot douche, the application of ichthyol and glycerine tampons, pressure weight treatment, rest in bed, general hygiene and last, but by no means least, the application of heated air, all of which would bring about an improved circulation in these parts and restore the patient to full health. It is inadvisable to resort to surgical operations as often as has been done in the past. The pendulum in the treatment of chronic inflammatory affections is swinging to the conservative side. At first there were only conservative methods; hot douches, tampons and treatment in watering places. Then, with antisepsis and asepsis, came the possibility of surgical interference. In the beginning, the appendages, only on the affected side, were taken out, then on both sides and often even that was not satisfactory, finally the most radical method, the extirpation of both appendages and uterus. But this had the disadvantage of bringing about a premature climacterium and within the last few years there has been a marked change in our attitude and it is to be anticipated that the conservative methods, among them the Brandt treatment, will be rehabilitated. There are extensive statistics on record by Peham and Keitler of Chrobak's clinic, in Vienna, which show that in one-sixth of the cases of chronic inflammations, treated conservatively, pregnancy had occurred. This should teach the surgeon to be less radical and less hasty to operate. As to technique, this massage treatment was entirely different from massage used anywhere else on the body. It did not consist in going into the vagina with one or two fingers of one hand and rubbing somewhere on the outside with the other hand. With the proper method the erotic side need not be considered. An indispensable premise is a proper diagnosis. One should be absolutely sure of the conditions he is to attack. If one did not succeed in making such a diagnosis at the first examination, let him repeat it, if necessary under an anesthetic. Many operations were done where results could be accomplished with less radical methods. It is true the Alexander operation is not a dangerous one, yet it subjects the patient to the risk connected with any operation, to a great deal of anxiety and expense, and the results are not always satisfactory. There are recurrences and complications. As an example Dr. Gellhorn cited the case of a patient under his care who expected her delivery in a month or two. This patient had been operated upon by a surgeon of great ability who did an Alexander operation, as a result of which she has an inguinal hernia on the right side. It might be that one special method of doing this operation gives better results than the others, but there are so many modifications of the operation that the inference is permissible that

none of these operations is ideal, otherwise there would be but one Alexander operation. The speaker operates as a rule only in cases of fixed retroflexion, where pessary treatment is unsuccessful. He does not believe that any case of fixed retroflexion can be cured by massage. Perhaps a few cases with very thin and very few adhesions might be relieved, but in those cases where the adhesions are dense, interference, save of an operative nature, is useless. There is room for Brandt's method in our therapeutic efforts, provided the cases are properly selected by means of an accurate diagnosis and provided this treatment is given in the way which Thure Brandt was the first to teach us.

Dr. Charles Shattinger said that in listening to the controversy between Dr. Ross and Dr. Kieffer it had occurred to him that possibly there was some ground for a reconciliation. Take for example the cervical laceration as a possible entry for infection and the resulting infiltration from that infection. It seemed only reasonable to suppose that if the resulting infiltration had not passed too far, the repair of the wound coupled with the subsequent forces of nature would result in ultimate recovery, just as an enlarged lymph node in the axilla would disappear after the cure of a wounded finger. On the other hand, if one would massage the lymph node, the channels leading to it from the finger assisting thereby the finger's circulation, one could bring about healing of the wound, and disappearance of the node. There were many roads to Rome. If the infiltration had proceeded beyond that of a mere exudate, the repair of the laceration alone would not remove the infiltration. Dr. Kieffer had said something about abscesses. Possibly Dr. Ross had not made it clear, but pelvic massage is held to be positively contraindicated in two conditions: cancer and pus. Dr. Gellhorn had stated that massage should be made toward the periphery. The directions are to massage toward the uterus. If one massaged toward the peritoneal end of the tubes one might drive their secretion into the peritoneum. The natural outlet of the tube was the uterus. In the enumeration of other methods of treatment, Dr. Gellhorn had said that last but not least was the application of heated air. He was sorry that Dr. Gellhorn had omitted one that was by great odds not the least in importance, viz., electricity. Nearly all of these measures seem to have the same effect that of producing reparative hyperaemia. It may be done by hot air, hot water, the high frequency or the galvanic current. Sometimes one method was more convenient than another. There was no miraculous virtue in electricity over hot air. They were simply two ways of reaching the same result. And in this same principle (improvement in the circulation) lay the value of massage. He was sorry that some remarks had

been made on the floor. One was that possibly some of Dr. Ross' patients had been cured by suggestion. That word was used over and over again and was usually the last resort of those who could not account for the manner in which a cure had been brought about. Granted that some of these patients may have gotten well by suggestion. If one wished to make a critical examination of the exact mode of action of a remedy then it might be well enough to inquire whether suggestion played any part in affecting a cure, but so far as the result was concerned it made no difference to the doctor or the patient what had brought it about. If a physician could cure a headache of eleven years' standing by suggestion, he should do it, that was very much better than to let the patient continue to have headache for eleven years longer. As to the necessity for a gymnasium, the Thure Brandt method did not necessarily mean the method exactly as the originator had practiced it. Thure Brandt was a gymnast teacher and no doubt used a gymnasium, but by the Thure Brandt method was now understood a certain number of procedures, a circular rubbing movement, lifting of the uterus and certain gymnastic movements of the thighs. If there were any exaggerated statements in Brandt's book it should be remembered that he was a layman. His treatment is not to be rejected on that account, but must stand or fall on its merits. However well founded in theory and however carefully studied in the laboratory, the crucial test of any treatment has always been and still is—the patient.

Dr. Ross, in closing, said that it was absolutely impossible to teach any one to do this massage without its being observed. The student must see it done by some one who knew how to do the work. However much he might study, it would be impossible to learn it otherwise. To say that this method would cause the death of a patient when properly performed could be due only to a lack of knowledge of the method.

CERVICAL LACERATION.*

By Davis Forster, M. D., St. Louis.

A recent discussion of a paper in the St. Louis Medical Society of Missouri led to the expression of opinions that were different as to effects and results of cervical lacerations, and of the advisability of repairing the same. Therefore, a review of the facts will not be out of place at this time, though the subject is an old one, and yet it might be well for us to go over well trodden ground again, lest we forget.

The first operation of hysterotrachelorrhaphy was performed by Thomas Addis Emmett, of New York and was named by Dudley, of Chicago. Emmett's operation followed upon the era of womb splitting inaugurated by his predecessors. The investigations of Emmett were of great value to the profession, as he first demonstrated by catching the denuded cervical lips with a hook and bringing them together, that there was a laceration present and not an erosion. Previous to that event the everted surfaces of the cervix had been treated as a pathological entity, cicatricial ectropion. Emmett's operation demonstrated itself of so marked benefit to the patient that it became a fad, and like all fads, was probably over-worked. The operation, however, was founded on firm surgical grounds and the technique of Emmett was so perfected that we use the same with but little alteration to this day.

Cervical laceration is caused nearly always by the passage of the fetus through the cervical canal, sometimes by the rapid dilatation due to curettage. The laceration may be unolateral, bilateral or stellate, is more often on the left side, because the occoput impinges on that side more frequently causing greater distention. We cannot wonder at the frequency with which a tear takes place when we remember that canal normally one-eighth of an inch in diameter has to dilate to allow the passage of a body with a diameter of more than four inches.

The uterus is a muscular body with longitudinal and circular fibers. It weighs after being emptied at term about two pounds. When the cervix is torn the point of insertion of the longitudinal muscle fibers is interrupted and their contractibility is interferred with. The uterus is unable to involute to its normal size. The organ becomes flabby, loose, boggy, infiltrated with serum. The mucous membrane is congested and menstrual flow exaggerated and deranged. Through loss of tone the uterus bends at the junction of the cervix and body. The cervix, with lips everted by muscular contraction, is forced down on the floor of the vagina by the overweight of the organ and by pressure the lips are further

*Read before the St. Louis Medical Society, December 2, 1905.

separated. Lined with columnar, ciliated epithelium, with glands secreting an alkaline mucus, it is forced to remain in the acid secretions of the vagina constantly irritated by them. The glands of Naboth become closed and form cysts which in time riddle the cervix with a cystic degeneration.

The uterus swinging normally in its peritoneal hammock, becomes overweighted and drops backward and further pressed by intra-abdominal force, swings in the arc until the fundus passes the promantory of the sacrum.

Again, the lacerated cervix serves as an open door through which infection may creep in by continuity of mucosa through nature's mechanical gateway, the external os, or through the lymphatics with which the uterus is so rich. Invasion by continuity of mucosa is, broadly speaking, by the gonococcus of Neisser, with subsequent involvement of endometrium, Fallopian tubes and peritoneum. While invasion through the lymphatics is more often of septic origin, the staphylococcus and streptococcus pyogenes. This invasion of foreign media of irritation takes place whether the tear be sufficient to involve the cellular tissue surrounding the uterus, or if it be confined within the area of the canal itself. Granted the bacterial invasion of the organ followed by nature's effort to limit the area of infection by hurrying to the parts a leucocyte army to build a plastic wall, we have the cardinal symptoms of pain, heat, redness, swelling and increased secretion, in short inflammation resulting, and the retroverted uterus is bound by plasma exudations in its unnatural position, where it lies with twisted vessels adding to its congestion.

This infection with its consequent inflammation may not take place for a variable time following the laceration and subincolution and is in no sense to be considered as a cause of the subinvolution. This subinvolution extends not only to the uterus but to the round ligaments, the tubes and surrounding tissues.

As regards prophylaxis, we should abstain from applying forceps until the cervix is fully dilated, should not give ergot until the uterus is empty, should refrain from puncturing the amniotic sac, or from making pressure upon the abdomen when the child is in the uterus. Sometimes when the surfaces are approximated and kept clean these cervical tears will heal by primary union, if not subjected to muscular contraction, the tears on the anterior and the posterior portion of the uterus are not subjected to muscular contraction and nature attends to these so well that the gynecologist finds the chief place for his work on the lateral parts of the uterus, which are separated by muscular contraction. If unable to heal primarily nature attempts a secondary repair by granulation, but where the squamous epithelium of the vaginal por-

tion meets the columnar epithelium of the canal, a cicatricial plug is formed which prevents further return to the normal. This scar plug by pressure on nerve endings is responsible for a variable number of symptoms, which are relieved by the removal of scar tissue. Among these may be numbered persistent headache and backache and intractable vomiting.

In repair of the cervix the patient is put to bed the day before the operation, given a saline laxative the night before and an enema the morning of the operation. Bichloride douche 1-2000. Vulva is shaved and covered with an antiseptic wet pack. Patient is brought to operating room where under general anesthesia the vagina and cervix are washed with green soap and bichloride solution 1-2000. Patient is in the lithotomy position with the perineum retracted with a Jackson or Edebohl speculum. Each lip or cervix is caught with a tenaculum forcep which gives control of the uterus. Area to be denuded is outlined with scalpel and tissue removed with scissors. Care must be taken to remove all scar tissue for scar tissue in the wound would prevent some of the good results looked for from the operation. A suture of No. 3 ten-day chromicized catgut is passed from vaginal surface of lip to the cervical canal and back through the other lip. About three sutures on each side are used to approximate as needed. Having not denuded the channel of the canal, we see that it is able to admit a sound but do not pack it with gauze. Keep vagina clean with douche twice daily and let the patient up on the tenth day.

The results are more satisfactory in proportion to the severity of this operation than any which the gynecologist is called upon to perform. Following the operation the first menstruation will nearly approach a hemorrhage, demonstrating the returning contractibility of the uterus, its reduction in size and its return to normal condition.

5249 Raymond Av.

Discussion.

Dr. W. B. Dorsett complimented the essayist on the description of the pathology. It was very pretty and very true. He was pleased to see that the essayist had described the operation as first described by Emmett and verified the assertion that but few improvements had been made in that operation. Dr. Dorsett had seen this operation performed by surgeons and criticised the method used for drawing together the denuded surfaces. He illustrated on the blackboard Skeen's method of marking out the cervical canal. One would find that when he began to denude, the canal would stand up in proportion to the depth of the incision. He illustrated the method of applying the ligatures and showed that this method would not bring in apposition all the raw surfaces of the edges of the wound. He

insisted that the ligatures should be introduced from the side and not over the end of the cervix uteri. He showed how, if introduced and tied over the end of the cervix, an additional os may be formed in the deep angle of the denuded surface. Dr. Dorsett then illustrated the method which he used and added that the straight Emmett needle should be used, otherwise one would not get a uniform depth of puncture. He does not begin to tie the sutures until all have been inserted on both sides; then the first suture was tied in the angle of the wound on one side and then the corresponding one on the opposite side, and so on alternately till the denuded surfaces were well brought in apposition. In performing a trachelorrhaphy, he never did one without a curettement. When there were erosions, there was the same pathological condition in the endometrium as the one found in the cervix, and to get the best results the uterus should be cleaned out first. If not cleaned out, these pathogenic organisms would come down on the fresh surface. As to drainage, after cleaning out the uterus there would always be little shreds left and for this reason it was best to put in a candle wick gauze drain. When necessary to use carbolic acid or drugs of that character, he never applied them when he did a trachelorrhaphy, for it would trickle down into the wound and would interfere with union. He preferred a number two 20-day catgut instead of the so-called ten-day catgut. The ten-day catgut did not always last ten days. In doing the combined operation of curettement, trachelorrhaphy, and perineorrhaphy catgut was much to be preferred to silkworm gut, thus obviating the necessity for taking out the sutures. He wished to say once more that the pathology as given by the essayist was excellent and as clearly stated as he had ever heard it.

Dr. Robert Barclay asked Dr. Dorsett, whether, after having placed all the sutures in position for tying and after having tied the first one, he tied the corresponding one on the opposite side before tying the one next on the same side, with each susure; and, if not, why not?

Dr. Dorsett, replying to Dr. Barclay, said he did not think it made any difference; he had done both and each was equally satisfactory.

Dr. Robert Funkhouser stated that one thing had not been mentioned in connection with this operation, which perhaps might be inferred either directly or incidentally, and it was in connection with the trouble now confronting the medical profession—cancer of the uterus. For that reason every tear, however slight, should be repaired and the sooner the better. A great deal had been done in the way of attempt to cure the disease by radical operations after it had appeared. To be successful in the treatment of cancer of the uterus prophylactic methods must be used, and there was no bet-

ter method than sewing up these tears. As a rule it was too late to operate after the development of cancer of the neck of the uterus. The thing to do was to anticipate the disease, for the vast majority of cases of cancer of the cervix occurred in women who had borne children. As to sutures, he had tried catgut, silkworm gut, silk, and had begun with silver wire, and he preferred silkworm gut and a perforated butlet, thus the objection of Dr. Dorsett, of the pulling apart of the lips of the wound, did not obtain for one could graduate the tension so that there would be no puckering. He used a machine needle, with the eye at the point. One could put the needle through threaded or thread it afterwards. He had found by this method that he could place the needle more satisfactorily to himself. There were cases, however, that tested the patience of the operator, those cases that could not be pulled down, where there were adhesions. He did not agree with Dr. Dorsett as to the use of applications to the uterus after curettement. In every case operated upon he never failed to swab out the uterus with iodine and he did not recall a single case where the flaps had failed to unite. When a sound could be put in immediately after the operation and the canal was found open, there would not be much trouble about drainage. There might be some pain in the first twenty-four hours. It was a perfectly justifiable operation to perform a curettement, a trachelorrhaphy, and a perineorrhaphy. When he had first done this operation he placed the patient upon the side but he had later adopted the method of placing her on the back, and using no speculum.

Dr. A. R. Kieffer commended the paper and said he was also glad to hear the views of Dr. Dorsett and Dr. Funkhouser, whom he did not often see operate. He differed considerably from Dr. Dorsett as to his technique. If Emmett placed the sutures as Dr. Dorsett had described, then Emmett did not understand the simplest method of placing the sutures.

The necessity for repair of the cervix existed every time the cervix was torn, no matter how frequently children might be borne. The first consequence of such a tear was hemorrhage, next increased danger of infection during the puerperium, next was subinvolution of uterus and pelvic organs generally, and, finally, adhesions and displacement, and if the tear was deep and unilateral, the uterus might be found pulled to one side with perhaps an ovary caught beneath it, and the woman in constant pain at every movement or jolt of the body. One reason this operation was neglected was that in this day of asepsis and antisepsis. even the young operator disdained to do anything less than a major operation. Trachelorrhophy is a minor operation. The woman suffered from it little or none and far as he was concerned, Dr. Kieffer added that she might eat a square meal

within fifteen minutes if she so desired. The sutures should rarely be left in situ more than eight days, He did not think catgut was to be relied upon, for as Dr. Dorsett had said, ten-day catgut might be in reality six-day catgut, while twenty-day catgut might last six months. The silkworm gut sutures were so easily removed that it could not be considered an objection to them. The sutures should be taken out as soon as there was no necessity for them. With patient in classic lithotomy positive and posterior-retractor in place, the first point to be considered was the location of the canal. After that each lip should be caught with a double tenacula forcep opposite future external os. Montgomery's advice was that before denuding one should cut through the scar tissue in the angle on one side and then on the opposite side, thus showing just how much scar tissue would have to be cut through. The knife gave a surface that would heal better than that made by the scissors. One should get all the scar tissue as the aim was to get a normal cervix. It was presumed that one left an undenuded strip but there was usually so much cystic degeneration that it was impossible to leave this strip in all cases on both labia. After denuding the two forceps should be grasped (in one hand) and held in (such) position that the margins of denuded areas are carefully coapted. Then a curved needle loaded with black silkworm gut should be employed. The first suture should be placed far enough back so that a second os could not be left there, then another placed just in front of that but not so transversely. After getting them all in place the labia should be separated and all clots washed out, then the back suture tied, then the others on the same side, and finally those on the opposite side. Cut them long. A string gauze drain should always be put in. This should not be left in too long. He had had one case in which trouble resulted from failure to remove drain the second day. He made it a rule to leave the drain in one or two days. There was no reason for the use of catgut unless one repaired the perineum at the same time. He did not often do a curettement prior to operation. Remove the cause by repairing the tear and the condition would get well of itself. By not doing a curettement the discharge coming down during the healing process was avoided. As to the nerve symptoms so often referred to, he did not believe in their existence to the extent usually mentioned in text books. Such symptoms as did exist depended upon the condition of the pelvis rather than upon the scar tissue. Nothing that he did in a surgical way gave more satisfaction for the amount of work done than repair of the cervix, and whenever the patient would consent he did it under local anesthesia.

Dr. L. H. Laidley summed up the discussion by saying that, first, Emmett had taught all it was necessary to know as to the condition and its

repair. He first indicated the needle that should be used. He also gave the method of introducing the sutures and as to the material used, it had been first silver wire, then catgut and silkworn gut. As to results, he was sure he got no better results from any surgical operation than he did from this procedure. This operation was as necessary as to repair the perineum. As to curettement, a few cases required it, but not all of them. The use of tincture of iodine after operation was certainly good practice, but he had never seen any necessity for the use of drainage.

Dr. C. C. Morris thought there was practically no difference of opinion as to the necessity for this operation, or as to the methods of performing it. The seeming difference expressed by the previous speakers was simply in the method that they had practiced to their satisfaction. There was something in all with which he agreed and something with which he disagreed. He agreed with Dr. Dorsett on the catgut suture, the curettage and the drainage. He almost invariably did a curettement and used a wick drain, removing it within twenty-four hours. He had used chromicized catgut for fifteen years and had never had occasion to regret it. No. 2 or No. 3 had proved equally satisfactory. The advantage in the use of catgut was that the sutures did not have to be removed, and so many of these cases of lacerated cervix were accompanied by a lacerated perineum. In this way one was not compelled to interfere with the perineal sutures in order to remove the sutures from the cervix. As to doing this operation primarily, in the home of the patient he had never attempted it and in the present status of obstetrics one did not often have these patients in the hospital. He had operated primarily upon two patients in the hospital, both primipara and both were delivered upon the operating table. The cervix was immediately repaired (with catgut) and followed by bi-chloride douches twice daily. At the end of the puerperium no one could have told that there had been a laceration of the cervix, although in one case even the uterine artery had been torn.

Dr. Kieffer said that everybody who had much experience with the operation would recall that in some cases there was alarming hemorrhage. One patient he had operated upon in the forenoon was visited in the afternoon and found to have had a severe hemorrhage. She ultimately made a good recovery. In another case, a week after the operation the bleeding began and he had to work with her the greater part of one night before being able to control the hemorrhage. Yet there was no history of this woman being a "bleeder" before that. In another case he believed he had really repaired a congenital fissure. The patient was jaundiced, the tear was in the median line, extending up behind the bladder and the edges of the wound were perfectly smooth. This pa-

tient had attacks of hemorrhages for two weeks.

Dr. Dorsett said that in describing the operation he had not attempted to go into minutia or to isolate certain cases. He used the tenaculum only to get hold of the uterus; he then used the curved needle, passing it through the anterior lip with No. 6 or No. 7 silk thread, and one through the posterior lip also. Tying a knot in each of these he could hold the uterus in any position desired without the aid of the tenaculum. In this way it was possible to pull down the uterus in case it was desired to introduce a sound. Again by the use of these anchor threads an additional surgical instrument in the vagina is done away with. It was a good idea to leave these threads and if it was found necessary, several days afterward, to take hold of the uterus for an examination as to its condition, these threads could be used thus obviating the use of the tenaculum which would injure the mucous membrane. By this means also the uterus could be held in position in case it should be necessary to steady it in the introduction of an intra-uterine douche tube. The threads could be left in until the case was ready to be discharged when one strand of the doubled thread could be cut with scissors and the anchor removed.

Dr. Forster, in closing, said he thought they were all on the same ground as to the method of doing this operation. He did not make it a rule to curette unless there was some indication for it. If there was a septic condition, occurring through the lymphatics, it did not necessarily follow that the mucous membrane was involved, and if not there would be little result from the curettement, while if it was a gonorrhoeal infection the curettement might be the means of spreading the infection. Once in a while, however, it was necessary to curette the uterus, and afterward he liked to pass a cervical speculum to protect adjacent tissues and wipe out the uterus with carbolic acid and then with pure alcohol. He regretted having left out any reference to cancer, for that was one of his special hobbies. Manifestly, attention should be called to that at all times. The records of the Women's Hospital of New York (Emmett's old hospital), showed that there had never been a true case of cervical cancer which came to operation in which the patient had remained alive for more than three years. In looking up the matter Dr. Forster had been unable to find a single case on record in New York that had lived more than three years. Those cases which did recover were looked upon as hyperplasias. He was glad Dr. Funkhouser had called attention to cervical cancer. With very few exceptions it had been demonstrated that laceration of the cervix had been present, and in those cases where the women had not borne children there had usually been performed a dilatation of the cervix.

As to primary operation, he made it a routine practice ten days after normal labor to examine the patient in a clear light to see if any laceration of the cervix had occurred. He did not believe it practical to do a primary operation immediately after labor for the uterus had not then returned sufficiently to its normal condition. If he found a laceration when he made this examination (about the tenth day), he scraped the torn edge with a knife just enough to denude and then united the edges with a catgut suture.

MAN AND HIS ECONOMIC RELATION TO THE EARTH.*

By George Homan, M. D., St. Louis.

In the course of a recent discussion before the St. Louis Medical Society on the subject of laws relating to criminal abortion, the extent to which that evil now obtains, and the difficulties attending the enforcement of the legal penalties provided against those offending therein, an instance was cited in which a married couple—both persons being of more than usual intelligence—had agreed in the commission of this act, the husband himself performing the operation although possessing no medical education—he having obtained from books (in a public library) the requisite knowledge as to method of procedure, instruments required, etc.; and this unsolicited disclosure together with other particulars furnished, served as a flash light to make plain certain social conditions and their efficient causes to the writer hereof.

The cause that prompted this unnatural crime was found to lie in want or the fear of want—a lack of bread for children already born to them—and thus differed in its complexion from instances of like action committed as a result of profligacy, or the possible disclosure of illegitimacy, or the unwillingness shown by many women comfortably circumstanced to accept the full responsibilities of the marital state. Obviously, just what the proportions are of these several classes can only be conjectured, the reasons for silence and secrecy being usually controlling if not imperative so that accurate statistics are not attainable even from private medical sources.

But even with the exclusion of that share of the problem chargeable to licentiousness or illicit relation, and the part due to folly or fashion in married life, there must yet remain a considerable proportion caused by the stress of economic hardship bearing cruelly on married people naturally honest and wishing to do

*Read before the St. Louis Medical Society, December 9, 1905.

right but who, affrighted by the specter of the wolf at the door, feel compelled to a course most perilous and morally unjustifiable—as was the case of the man and woman just instanced—and it is this phase of the question only, and the related phenomena, to which consideration is now invited. And if, from a searching scrutiny of the deep-lying causes and actuating motives, it shall appear that the effect of present law is to force well-intending people into crime then instead of urging the infliction of legal penalties upon the victims of social maladjustments and economic wrong it is suggested that the true course of the medical profession would be to demand the repeal of every such law, and the confirmation of the statutes to natural right and fundamental justice; and such a demand can come with more impressive force from our profession than from any other, for as has been said the clergyman sees the good side of mankind, the lawyer the bad side, but the physician sees the weak side—sees humanity with the masks and disguises that convention or craft may dictate or find necessary to put aside, and the secrets of life laid bare to the medical eye and ear.

Stated in its simplest terms, man's whole endeavor is to gain his daily bread—not weekly bread or monthly bread but bread day by day—for it has been shown by acceptable authority that the margin between food-sufficiency and starvation taken the world over is less than seven days, and that if the channels of trade should be blocked or the instruments of commerce seriously hindered in operation, if the seasons generally should change or the harvests fail the pangs of hunger would be felt at once by that considerable part of the people ever near to want in every civilized land, and thence extending until famine became a feature involving entire populations, the dwellers in cities bearing the weight of the affliction which commonly is tempered by the dole of charity.

Such an affliction, even in modified form and however produced, must vitally influence population progress in respect of health, reproduction, and longevity, and if it be found that such occurrences are needless and simply the mischievous outcome of human error in the placing of wrongful burdens on industry, in lessening the wage of toilers, in making harder the lot of all workers, in clouding with uncertainty of livelihood the future of families, in producing side by side monstrous examples of undeserved poverty and unearned wealth, in driving or tempting to crimes against life, health, morals or property the weak, the unfortunate, the despairing, or the unemployed, then a valid indictment must lie against the framers and supporters of society so constituted, and a full share of the guilt of such offending must rightly be laid at their doors.

Professional talkers on race suicide have darkened counsel with

many words but all have been conveniently blind to the tremendous force of economic causes that compel to this crime—causes that operate as silently and surely as gravitation—they blink the fact that the struggle for existence is becoming more intense, that the cost of living to the average family is rising every year without a proportionate increase of the family income,[1] and even preachers and teachers should know that in morals as well as mechanics it is a truism that there is a point where the breaking strain is reached, where human nature gives way under the stress of circumstances that seem irresistable, and yields in a struggle against odds that appear overwhelming, be the consequences what they may, and howsoever such nature may have been fortified by religious faith, moral practice, or prudent counsel.

Man in his economic relation to the earth is simply a land animal; his physical frame is formed from earthly elements, his food, shelter and raiment come from the same source, and at the end of life he mingles with the dust from which he came. Such being the case the manner of his living, the exercise of his powers, the employment of his faculties must of necessity be shaped and conditioned by his earthly surroundings and circumstances.

In the simple conditions of primitive life these relations were easily understood and were voiced by the Iroquois chieftain when he said, "The sun is my father, the earth is my mother—I will rest on her bosom." But as society progressed its organization became more complex, communities and cities arose; and man as an individual was brought in close living and working contact with many thousands of his fellows, and all the powers of invention and the resources of skill, art, and science are now taxed to supply his needs and minister to his comforts. But notwithstanding the change in appearances he is no less a land animal than before, although separated to a certain extent from nature, as that word is commonly used, but this separation is not one necessarily entailing hardship in any form provided the laws governing society are modified to meet the changed conditions of that society.

For example, in primitive usage the law of property was expressed in the words Mine and Thine—that which a man earned or held honest title to was his against all comers, and the same rule applied to his neighbor—all the products of industry, every form in which wealth appeared, was subject to this rule of division, the law recognizing its fairness and confirming its equity—any unauthorized invasion of such property right being adjudged robbery and punishable accordingly.

As more settlements grow into communities and cities a form of wealth appeared unknown before and which no individual or partnership of persons produced but which

was created in consequence of the presence and activities of every member of the community that could render a service or had a want to be supplied. This fund appears as a result of natural law to meet common social needs in a manner analogous to the provision of milk in mammals for the sustenance of their offspring; and, tested by the law of primitive justice before mentioned, it belongs to all by reason of having been produced by all, and rightfully can be applied only to the common purposes of the community that created it—in short it is neither Mine nor Thine but Ours being the common product of the social life. It is moreover the unfailing index and measure of such life, mounting with municipal growth, being largest where the need is greatest, and vanishing to nothingness when cities die. This fund, or ground rent, in capitalized form reaches to fabulous sums in the great centers of population, a piece of ground in New York having been recently sold at the rate of about $28,000,000.00 per acre while in London some few years ago a few feet sold at the rate of nearly $67,000,000.00 per acre.

Nearly all of the vast revenues drawn from this source is now diverted into private hands instead of being applied to meet public needs, thus throwing the heavy weight of taxation upon thrift and industry—showing that human law has not kept pace with social and economic development, and through such failure or oversight affording to government a pretext to wrongfully invade the property rights of the individual and by arbitrary process take from him that to which his title is perfect; those who are least able to pay being burdened most, and the gross effect of the system being to foster concealment, deception, falsity, lying and perjury in all property returns.

If attempts of this kind were abandoned till things produced by human labor and universally needed were freed of taxation, the gain in public morals alone would be marked; but the economic benefits would be still greater, for the demand for such products would be enormously increased with a corresponding call for additional labor to meet this demand.

The accepted rule of judgment in human affairs is that by their fruits ye shall know them, and thus measured our civilization is not a success in the ordaining of justice between man and man. If the power to tax is the power to destroy then the power to untax must be the power to save, and legislation must make speed to bring about just economic relations between those whose right to the use of the earth rests on the simple and sufficient fact that they have been born and are here.

The expressions, natural right and fundamental justice, have already been emphasized in this connection, the definition of the first being that

such right entitles the worker to his full earnings undiminished by private robbery or governmental levy, while fundamental justice not only recognizes this right as pertaining to the individual but extends the principle and awards to the city or community for public purposes that fund in ground rent accruing by reason of its own growth and activities.

The possibilities connected with the recognition of monopoly rights in the earth under present law are shown by the fact that visitors from other spheres descending to earth become the property of the owner of the land on which they fall; meteorites, fragments of other worlds, have thus become private property, and the messenger from Mars may meet the same fate unless Martian might or diplomacy shall prevail over terrestrial law.

In further illustration of such possibilities, and in immediate connection with the economic relation of man to the earth, let it be supposed that in some great center of our civilization all the usual sources of food supply were cut off, and that the miracle told in Hebrew chronicles of the fall of manna from heaven shall be repeated. As probably not more than three out of every ten persons living in large cities own their homes, and as the owners of the land could legally lay claim to all the manna that fell thereon, can imagination conceive the wolfish struggle for food that would instantly begin in every street and other public place—the scenes of brutality and bloodshed that would mark the coming of this bounty from on high! And yet in the face of such a possibility prayers are offered in the churches for the relief of destitution and human wretchedness addressed to the Almighty God, when it may be plainly seen that as conditions now are Omnipotence itself is powerless to bring about a change in this respect.

Arguments or pleas such as the foregoing and resting on merely abstract justice or isolated principle have very little weight with many minds, and carry no convincing force—only appeals to precedent, to the record of what has been done in other ages and places can make an impression upon them. For the purposes of this argument it is fortunate that this mental peculiarity exists as the demand can be met and an example cited that marks an epoch in human history—a period that has constituted a beacon light in the intellectual progress of the race.

This period, which lasted about one hundred and fifty years, developed more than twenty-four centuries ago and the place was the city of classic Athens. The Athenian population probably did not amount to one-fourth of that which St. Louis now has, but Galton and Symonds agree in the opinion that the intellectual level of its people was perhaps as superior to ours as our race is to that of the Australian savage.[2] Chattel slavery, however, was every-

where known in that age, and was a feature of the civic life of Athens, but no slave or alien shared in the exercise of citizenship.

Taxation was unknown or if any levy was made it fell only on the rich. Poverty as we know it did not exist for the revenues drawn from all those sources which today would be termed public utilities, franchises monopolies, privileges, etc., went to meet civic needs. Mines, markets, fields, forests, wharves and the like were operated for the public benefit with the result that want and the fear of want was not known, for a comfortable living was assured to anyone who would work in whatever line was most congenial to his taste. As a consequence the sordid passions of averice, greed, selfishness, were weakened at their sources, and the people turned their minds to intellectual pursuits with results unmatched before and unequalled since—producing a marvelous array of names familiar to scholars of all later time, and known for centuries even to the school children of every civilized nation.

It is not an uncommon event in the annals of different peoples for the name of some remarkable man to shine out in solitary brilliancy, but during the period in question there appeared in the firmanent of thought a blazing constellation of geniuses of the first magnitude, covering the whole range of human knowledge, exercising every faculty of the mind and making an impression on the intellectual life of the world so lasting that its like has never since been approached; and even the human form at that time reached proportions so perfect in symmetry and strength that the classic Grecian model remains unequalled to this day.

In philosophy, natural science, oratory, statesmanship, architecture, sculpture, painting, history, poetry the tragic and satiric drama, etc., the names of Socrates, Plato, Aristotle, Demosthenes, Eschines, Lycurgus, Phidias, Pericles, Praxiteles, Zenophon, Thucydides, Euripides, Eschylus, Sophocles, and Aristophanes shine preeminent in this immortal galaxy in which, however many other illustrious names might be included.

It may be urged that causes other than the one cited produced this remarkable result but this development took place only during the comparatively short time mentioned, while the history of Athens as a city covers upwards of three thousand years with no previous or subsequent manifestation of the kind. Furthermore the Grecian colonies and settlements found in many places throughout the length of the Mediterranean and Black seas yielded no such fruitage, while the sky, the sea, the soil, and the air of Greece are today about the same as they were during the Golden Age of Pericles.[3]

Such being the case the conclusion seems inevitable that this wise local adjustment in man's economic relation to the earth effected through

the operation of law and not known elsewhere, was the potent determining factor in the results; and if, in such a space of time and notwithstanding the existence of human slavery, such a development was possible within the narrow compass of a single small state—a city that was continually threatened by jealous neighbors and often attacked by powerful enemies, by whom her final overthrow was wrought—what limit could be set to the glorious possibilities if the people of this nation should be brought to a sense of this fundamental justice in the ordering of man's relation to the element on which and from which he must live! It would in fact usher in the reign of peace on earth to men of good will, when those who will to do good would find the way made easy, no law to drive them to evil doing; when the expectation of human life either born or unborn would no longer hinge directly or indirectly on doubt of a livelihood for anyone willing to work—a time when the shocking spectacles and occurrences daily afforded by a civilization gone wrong through a false economic system would no more be seen, and a Golden Age resting on mankind's physical, moral and intellectual excellence and health would again appear; and no worthier purpose than this can claim the support of the medical profession—a profession that must count nothing that is human as being foreign to itself.

NOTES.

1. Dun's Review for October, 1905, says that the cost of all the necessaries of life is steadily rising, and the prices are now higher than they have been any time during the last twenty-five years.

The Springfield *Republican*, Nov. 20, 1905, in "Prosperity and Prices," says:

"There has been a marked advance in the average prices of food products within a month and * * * for commodities in general the advance from last year has been heavy * * * . For the consumer who is not closely identified with the profits of production, it is a prosperity which is being borne with increasing difficulty. Wages are higher, but their purchasing power is much lower. Salaries and fixed incomes are generally improved, but their command of the necessaries and comforts of life has greatly declined. * * * For the great mass of the people, who are regularly employed in bad as well as good times, and regularly in receipt of wages and salaries and incomes, the situation is a trying one, and increasing difficulty is faced in making both ends meet. Upon these classes of people there is being forced the necessity of practicing the closest economy."

2. Says Dr. Francis Galton, of the highest authority in anthropological science, "A population of ninety thousand produced two men, Socrates and Plato, whom the whole population of Europe [elsewhere] has never equaled, and fourteen men of an ability of which the Anglo-Saxon race has only produced, in two thousand years, five equals." He asserts that the average ability of the Athenian race was about as much above that of the English race as that race is above the African Negro.

Bliss, The Outlook 81, 11.

3. "We are happy in a form of government which * * * is original at Athens. And this our form, as committed not to the few, but to the whole body of the people, is called a democracy. How different so ever in a private capacity, we all enjoy the same general equality our laws are fitted to preserve; and superior honors just as we excel. The public administration * * *, is attainable only by merit. Poverty is not a hindrance since whoever is able to serve his country, meets with no obstacle to preferment from his first obscurity. The offices of the state we go through without obstruction from one another; * * * not angry with a neighbor for following

the bent of his own humor, nor putting on the countenance of discontent, which pains though it can not punish—so that in private life we converse without diffidence or damage, whilst we dare not on any account offend against the public, through the reverence we bear to the magistrates and the laws, chiefly to those enacted for the redress of the injured, and to those unwritten, a branch of which is allowed disgrace" * * * .

"In our manner of living * * * we cultivate philosophy without enervating the mind. We display our wealth in the season of beneficence, and not in the vanity of discourse. A confession of poverty is disgrace to no man, no effort to avoid it is disgrace indeed. There is visable in the same persons an attention to their own private concerns and those of the public; and in others engaged in the labors of life, there is a competent skill in the affairs of government. For we are the only people who think him that does not meddle in state affairs—not indolent, but good for nothing. And yet we pass the soundest judgments, and are quick at catching the right apprehensions of things * * * . Herein consists our distinguishing excellence, that in the hour of action we show the greatest courage, and yet debate beforehand the expediency of our measures.

* * * "I shall sum up what yet remains by only adding—that our Athens in general is the school of Greece * *

* "That I have not on this occasion made use of a pomp of words, but the truth of facts, that heighth to which by such a conduct this state has risen, is an undeniable proof. For we are now the only people of the world who are found by experience to be greater than report. * * * That we deserve our power, we need no evidence to manifest. We have great and signal proofs of this, which entitle us to the admiration of present and future ages * * * . In the just defence of such a state these victims * * * have valiantly fought and bravely died. And every one of those who survive is ready, I am persuaded, to sacrifice life in such a cause."

From funeral oration of Pericles—Thucidydes, Book II, (Smith's translation).

Authorities and sources of information consulted:

United States Census Reports. Boeckh, Public Economy of Athens. Draper, Intellectual Development of Europe. Spencer, Social Statics. Xenophen Works (Schmitz' translation). Ring, Problem of the Unemployed. Mahaffy, Social Life in Greece.

DISCUSSION.

Dr. Barclay, speaking of the comparison of our civilization with that of Athens, said he was sorry that this one had been selected. For instance, Athens had no hospitals for the sick, no hospitals for the insane, nor any of the humane institutions so common to Christian civilization today. Greed and selfishness were rampant then as now. Slavery prevailed then, and openly. He was amazed, too, that Dr. Homan should have included in his list of admirable men, Aristophanes. If there was any one thing, that more than all others, tended to bring about the execution of Socrates, it was the morbid influence of Aristophanes. He it was, who held up to ridicule this great benefactor of his own and subsequent generations, and did so much to bring about this good man's death.

As to the abolition of private ownership of anything, however, desirable, there were many difficulties in the way. No laws sufficed to deter the people from action who wanted to do certain things. A prevailing spirit of loving kindness as expressed in the word *humanitas* was the only thing that would ever bring about general amelioration of inhumane conditions. There were difficulties insuperable, or that seemed so at the present time, as to the method of putting summarily into effect any measure looking to the creation of a condition of affairs

such as Dr. Homan had advocated. When the strong grew tired of a thing and wanted it stopped, it would be stopped; but all human laws were a concession by the strong, and represented human power. Aggregations of capital had increased the value of human labor. All men were not provident. Man brought nothing into this world and it was sure he could carry nothing out of it. Aggregations of capital were made possible by the secure tenure of land but impossible under other conditions. One man's right ceased where another's began. People by their self-denial accumulated property, the unconsumed product. Capital represented self-denial, and there must be some place reasonably secure where people could safely invest their capital. Dr. Barclay added that while he felt incompetent to discuss the subject of public ownership of all land, he was satisfied that we in these days of Christianity, do not care to return to Athenian civilization.

WHEN IS A PATENT MEDICINE NOT A PATENT MEDICINE.*

By F. R. Cornwall, S. Louis, Mo.

I have been requested to assist in the solution of the vexatious problem "When is a patent medicine not a patent medicine?" This problem is undoubtedly vexatious, not because it is new, but because it is out of the ordinary, and anything which is out of the ordinary is unfamiliar. It is the difficulty which a lawyer would experience if he were asked to give the meaning of Diethylsulfonmethylethys-methane, or Diethysulfondimethyl-methane, or Acetyl-paraphenetidine, when perhaps you gentlemen would immediately say Trional for the first, Sulfonal for the second, and Phenacetin for the third.

The question at issue involves the difference between patent medicines and proprietary medicines, and might be said to be a mixed question of law and medicine—not that law and medicine mix well together, because they make a horrible dose and there is a great difference between the two; for instance, when taken separately, you administer a dose to a patient, the patient is ignorant of the contents and happy in his ignorance. When a lawyer administers a dose to a client, it not only has to be labeled, but the knowledge conveyed frequently brings unhappiness. There is likewise a difference in the fees of each, in favor of the physician, I believe.

Now with reference to the difference between patent and proprietary medicines, it is suggested that in its simplest form it relates to the nature of the property right. In the instance of patent medicines, the

*Read before the St. Louis Medical Society, December 9, 1905.

property right exists with relation to the article itself, and has nothing to do with the name. With relation to proprietary medicines, the property right exists with relation to the name only, and has nothing to do with the article of which the name forms the handle. In the case of a patent medicine the right is created by Statute, while in the case of the proprietary right in the name, it exists by virtue of common law. It is the difference between the substance and the name of the substance. The term "patent medicine" has arisen from the fact that it has been the practice in the Patent Office heretofore to grant patents on any prescription which might be filed in connection with an application,—it was even not a requisite that the author of the prescription should be a physician. The advantages and virtues of the remedy were set forth, and in most cases, proved to be more imaginary than real. However, the inventor's name was enrolled along side those of Whitney, Morse, Edison and Bell, depending upon the alphabetical position of his initial, but which enrollment had nothing to do with the value of his contribution to the arts and sciences. It is perhaps within the memory of many present that patent medicines were more common ten or fifteen years ago than they are today; in fact, medicines were more common than the diseases they were accredited to cure.

According to our laws, a patent is granted for a term of seventeen years and gives to the patentee or owner of the patent the exclusive right to make, use and sell his invention for that length of time, at the end of which the invention becomes public property. A patent, however, is supposed to be predicated upon an invention which is new and useful, and novelty and utility in the sense of the patent law means more than those words ordinarily convey as commonly employed; for instance, an invention to be new must produce a new result. In recent years the Patent Office has imposed conditions upon the granting of patents for medicinal preparations, and those conditions are that there must be some chemical or physical change undergone in the preparation of the medicine and which modifies, affects or changes the product, making it different from anything produced before. This probably accounts for the fact that today few patents are granted on medicinal products, and none on mere compounds or mixtures.

From the above it is quite apparent that the word "patent" as a descriptive term for medicines is a shortening up of the more proper term "patented" as applied to medicines. Under our law it is required that one having a patent shall mark his invention "patented" together with the date thereof, else he will not be entitled to the collection of damages on account of infringement without proof of personal notice of the patent to the defendant. The

law further provides that anyone falsely marking an article patented on which no patent has been obtained shall be subject to a fine of $100.00 for each and every offense, one-half of which shall go to the informant. While it may be true that many medicinal preparations in extensive use today were at one time the subject of letters patent of the United States, it is also true that the patents on a number of these have expired. While it once would have been accurate and correct to regard these medicines as patented medicines or patent medicines, it is no longer strictly correct to call them patent or patented medicines, because the patents therefor have ceased to exist and are no longer in force or effect.

This leads up to the second branch of the proposition, to-wit, proprietary medicines, and in taking up this phase of the inquiry it might be well to remark that it is possible for a medicine once patented, and known as a patent medicine, to be called by some new and fanciful name, vesting in the person adopting such new and fanciful name the proprietary right to that name. For instance, after a patent has expired and the medicine forming the subject matter of the patent can be made by the public at large, the public, in addition to having the right to make the medicine, also has the right to call that medicine by the name under which it was sold, and by which it was known, during the life of its patent. Take Castoria, for instance, —not because you are crying for it or because you need it, but for illustrative purposes only,—this was a patented medicine and today by being called a different name, which is new and fanciful, it is possible to vest in the person adopting such new and fanciful name a proprietary right to that name. It is no longer strictly accurate or true to speak of Castoria as a patent or patented medicine as the patent therefor has expired.

The history of Castoria is interesting. In 1868 Dr. Pitcher secured a patent on a laxative compound said to be a good substitute for castor oil. The word "Castoria" was nowhere mentioned in the patent. The patent expired in 1885, and through various assignments the title thereof at the time of expiration was vested in the Centaur Company. The Centaur Company brought suit against Heinsfurter and others to enjoin the use of the word "Castoria" as a trade mark for laxative compounds and complained that the defendant was advertising extensively that it was the only manufacturer of genuine Castoria, and intimating that all others, even the owners of the recently expired patent, were selling spurious compounds. Justice Brewer rendered the decision of the Court, which is reported in 84 Fed. Rep., 955, and held that when a patented article becomes known by a particular name, though an arbitrary one invented by the patentee, such as Castoria, such name becomes public

property on the expiration of the patent; and no trade mark right exists therein, or can be acquired by subsequent use. This decision followed that of the English Courts in the "linoleum" case where the same question was decided.

To imagine a situation which will be useful in answering the question forming the text, we will assume that John Smith, following the directions of the Castoria patent, made and sold on the market a laxative compound to which he had given the name Star or any other designation not geographical, descriptive or deceptive, but which would vest in John Smith a property right to the trade mark or name he had adopted for this laxative compound. By judicious advertising a large business might be built up in Star Laxative. Star Laxative is a proprietary medicine. The public at large has the right to make Castoria which is the same as Star Laxative; the public at large has the right to make this laxative compound and sell it under its name Castoria; but the public at large does not have the right to sell this laxative compound under the name of Star so as to deprive John Smith of the fruits of his advertising and business energy. Not only will the Courts prevent another from marketing Castoria under the name of Star, but the Courts will prevent any other person from putting out an entirely different laxative compound and calling it Star. In the latter case it will be seen that not only is the infringer pirating the good name, reputation and fame of John Smith's Star Laxative compound, but in addition, is perpetrating a fraud upon the public by representing to the public that the spurious Star Laxative is the Star Laxative compound well known to the public and which the public has purchased as being of John Smith's manufacture.

While John Smith may have a proprietary right in the name Star as applied to a laxative compound, such a fact will not prevent Brown or Jones from selling Castoria under a different name such for instance as Crescent or Moon, and acquiring proprietary rights in the particular names they have adopted, and their rights will be protected by the Courts to the same extent that the rights of John Smith in his name Star, are protected.

So-called secret preparations, those in which the ingredients, the proportions thereof, or the method of mixing them are retained in secrecy by the manufacturer, may also be called proprietary medicines, because the formula in this instance is the property of the manufacturer. The Courts have held with respect to this that the workmen employed by the manufacturer, having acquired knowledge of the manner of making the secret compound, will be prevented from exercising his knowledge to the detriment of his former employer.

It will be noticed in the above-

noted instance that fraud enters into the proposition and is undoubtedly an important and possibly a controlling element in all cases of this kind. By maintaining secrecy with relation to the method of making a compound, the manufacturer hopes to vest in himself a monopoly more secure and exclusive than is granted in the way of letters patent, and for an indefinite length of time. The only risk the manufacturer runs in pursuing this policy is that some one else, through no fraudulent act, but due to his own knowledge and energy, may discover the secret connected with the compound, when, if the compound is not of a patentable nature and cannot be patented, or if it has been in public use or on sale in the United States for more than two years, so that no patent will be granted thereon, the originator of the preparation is no longer the individual possessor of the secret, as knowledge thereof is in the possession of another and possibly may be disclosed to many others. I know of no case where one who, by no act of fraud, but through his own individual labors discovered the secret of manufacturing a compound, has ever manufactured and attempted to sell such a compound on the market under the same name adopted by the original maker. By analogy, however, it would seem that the discoverer of the secret would be entitled to call the preparation by the name under which it had been sold by its original manufacturer, because that would be the only proper name for it. Should he call it by a new and fanciful name, a proprietary right in that name would become vested in him.

The answer to the question "When is a patent medicine not a patent medicine?" is, therefore, when the patent for the medicine ceases to exist. A proprietary right may exist with respect to a new and fanciful name for a medicine irrespective of the fact that said medicine may have at one time been patented, or that it may be an unpatented medicine. A proprietary right may also exist with respect to a secret formula to protect the owner of said secret formula against fraud.

Discussion.

Dr. James Moores Ball asked if the law made provision for the revocation of a patent.

Mr. Cornwall replied that the law did not make any provision for the revocation of a patent. If the patent had been granted to one who was not the original inventor, one might, by proving that fact in court, and in a suit brought under the patent, have the original patent annulled.

Dr. James Moores Ball asked if there was an international patent law or agreement.

Mr. Cornwall replied that there was an international convention in which inventors from this country might apply for patents within one year from the date of their application in this country, and the same

right was granted here to foreigners. But a patent granted in the United States did not extend beyond the boundaries of the United States and the same held true of Great Britain and other countries. The Commissioner of Patents was appointed, not elected. As to the facetious remarks of Dr. Moore relative to the new and useful in patent medicines, if the subject matter of an application was a medicine, and it responded to the test of novelty and utility, the primary examiner was supposed to decide this. To determine whether an invention was new or not, he had only to consult prior patents and prior publications on the subject. If it was not found in any of them, then he might consider it new. As to utility, he had no means of determining that, except the statements of the inventor. Replying to a question by Dr. Homan, Mr. Cornwall said that when the application was filed the fee was $15, which had to be paid when the application was lodged in the patent office. If decided to be patentable, the inventor must then pay $20 before the issuance of the patent. The attorney's fee ranged from $40 to $50. Some of these advertised, "no patent, no fee." The patent office was the only institution in the government which had a surplus in the treasury. This was now more than $5,000,000, drawn from the pockets of the inventors of the country.

Dr. W. M. C. Bryan asked what would be the necessary fee for copies of the patents covering patent medicines.

Mr. Cornwall said, in reply to a query by Dr. W. M. C. Bryan, that copies of patents were sold for five cents each or all the patents in any class might be purchased at the rate of three cents each. The best way to get such information would be to have some one in Washington go into the patent office and secure those desired. They would probably forward the entire lot for $3 to $5.

Dr. William H. Stauffer wanted to know if there was any law requiring that the manufacturer of a patent medicine adhere to the original formula.

Mr. Cornwall replied that there was no law compelling the manufacturer to adhere to the original formula, but if the medicine was not made in accordance with the particular method upon which the patent was secured, then the patent did not cover it. This was one of the questions raised in the suit brought against the manufacturers of Castoria. It was said that the manufacturers of Castoria were not making it according to the original formula.

Dr. Walter B. Dorsett wanted to know if the formula for listerine was on record in the patent office.

Mr. Cornwall replied that it was not. Listerine was a secret nostrum.

Dr. Barclay thought that both the opinions of the two gentlemen who appeared to differ so radically, were correct and harmonious. Fraud in

the case of a useful patent medicine would consist in the manufacturer selling the medicine to the public through and by misrepresentation, claiming that it was something that it was not, or that it did something that it did not do. Antiphlogistine, for example, might be in a sense, "new and useful," but it might not be so for the particular purpose for which the manufacturers advertise it. Dr. Barclay asked whether the law required the manufacturer to specify, in his application for a patent, wherein a thing was "new and useful."

Mr. Cornwall replied in the affirmative.

Dr. Barclay: Were the manufacturers at liberty subsequently to add anything they pleased to that in placing it before the public?

Mr. Cornwall said they were.

Dr. Barclay thought that, this being the case, if it could be shown that the patent on an article had been secured by fraud, the patent would thereby be made null and void. If on the other hand the manufacturer, in offering it to the public for sale, claimed the remedy did things which it did not do, it was certainly fraud, and was actionable in the jurisdiction of the courts of justice.

Dr. C. A. Snodgras, thought that from the discussion the gentlemen present had a poor opinion of what was being done at Washington City, in the issuing of patents for patent medicine. He further stated that Dr. Rosenau was doing some of the best work that was being done in the world in the testing of biological producst that were being put upon the market by manufacturers. Dr. Snodgrass stated that he was informed by Dr. Rosenau, when he visited his laboratory in the early part of the year, that it was the intention of the management of the hygenic laboratory to take up the standardization of certain drugs, such as extracts. The speaker stated that some one should be selected who is competent to pass upon the therapeutic value of the drugs used in the practice of medicine, and those that were to be incorporated in the formula upon which patents were issued, and that all such action should be based, if possible, upon a physiological test. He stated that any medical man who would give a drug when in doubt as to its exact physiological action was not worthy of the title "Doctor."

Mr. Cornwall said that these experiments had been carried out in the agricultural department. While the patent office had a laboratory for making experiments, it was seldom resorted to.

Dr. Ravold said we have heard that when application is made for a patent upon a preparation, that the formula, the method of manufacture and what it is intended to be used for, must be given, but he desired to know whether it was necessary for the applicant to file a sample of the preparation with the application.

Mr. Cornwall said it was not.

Dr. Ravold: Then the Government, through its Patent Office, never knows, or inquires, or has any method of ascertaining whether a preparation sold under a patent contains the ingredients set forth in the formula of the petition. In fact "any old thing" can be compounded and sold under a patent, once obtained.

Mr. Cornwall said Dr. Ravold was correct.

Dr. Ravold said he must then agree with a previous speaker that drawing a hard and fast line between what is and what is not an ethical patented preparation, is very fine hair-splitting. From the information obtained tonight he was decidedly in doubt if the word ethical could be applied to any patent medicine.

Dr. Robert Barclay said that he would like to have the essayist to give the present legal definition of the term "Property" which had been used. As he understood it, the word "Property" signified "an abstract right or title to any thing and not the thing itself;" or, in other words, "Property was possession with sanction of law."

Mr. Cornwall replied that property existed in three forms: real, personal and voted rights; the latter being created by the statutes must be literally contrued. The rights in a patent were vested by the statutes. A common law right would be protected by common law, but a patent right, being a statutory right, would not be protected by common law but only by the statutory enactment. It was not a personal or real right, but evidenced by a certificate or grant.

Dr. Barclay said that according to modern law, relating, for instance, to real estate, as he understood it, a man had a right to the so-called natural uses of his property irrespective of the effects thereof upon that of his neighbors' property. If correct in this, did it hold good also with respect to the patent right?

Mr. Cornwall replied that a patent right was a contract between the government and the inventor or his assignees. The thing to be patented must be new and useful. In that case it did not take anything away from anyone. If an individual or a community had it in possession, then it would not be new, and if it was not useful, the patent would not be granted. It was not with the idea of taking anything away from anyone, or encroaching upon any one's rights, that the patent was granted. The intention was to give an inventor of a new and useful improvement the exclusive right, for seventeen years, to make, use and sell his invention. At the end of seventeen years it became the property of the public.

Journal Missouri State Medical Association

The Official Organ of the State Association and Affiliated County Societies.
Published Monthly under the supervision of the Publishing Committee.

ADDRESS ALL COMMUNICATIONS TO 534 NORTH VANDEVENTER AVENUE, ST. LOUIS.

Volume II. JANUARY, 1906. Number 7

C. M. NICHOLSON, M. D., Editor
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Publication Committee:
C. M. NICHOLSON, F. J. LUTZ. B. M. HYPES.
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EDITORIAL.

OBSCENE ADVERTISING.

The action of the St. Louis Medical Society in initiating a fight against indecent advertisements in the local newspapers should be commended not only by the profession of St. Louis but of the country generally.

A committee consisting of Drs. Homan, Brown, and Scherck was appointed to call the attention of the city attorney to violations of section 1,447 of the city ordinance, which follows:

> Any person who shall in the city of St. Louis advertise or cause to be advertised in any newspaper printed or circulated in said city, or shall print or publish any advertisement or notice in any newspaper printed or circulated as aforesaid, purporting to give information as to the treatment of venereal or private or womb diseases, or impotency, self-abuse, sterility or any disease pertaining to the genital organs, or purporting to give information from whom or where medicine or medical treatment may be procured in the above mentioned cases, or any of them, shall be guilty of a misdemeanor, and upon conviction, shall be fined not less than fifty nor more than five hundred dollars for each and every offense. (R. O. 1892, sec. 988).

Information against several of the advertisers was furnished and Mr. I. V. Barth was retained by the society to assist the city attorney. The first of these cases was against Dr. Nathaniel K. King, and was tried December 1st. The attorney for the defendant admitted that the ordinance covered the case, but contended that it was unconstitutional on the grounds that the ordinance was not a proper exercise of the po-

lice power but on the other hand an unwarranted and unnecessary encroachment upon personal liberty, and that, assuming the regulation to be a proper exercise of the police power by the State, it does not fall within the purview of the Municipal Assembly, and hence is void and of no effect.

Counsel for the prosecution held that the ordinance was not, as contended, a prohibition of a man practising or advertising a legitimate occupation, viz., that of a physician, but a regulation of such advertising.

Regarding the defendant's contention that the prohibition to advertise these matters hurt the defendant's business, counsel quoted Judge Cooley on Constitutional Limitations, that the most proper business may be regulated to prevent it becoming offensive to the public sense of decency, and urged that the practice of medicine is almost everywhere regulated by statutory limitation. Regarding the contention of the defense, that in any event such action was *ultra vires* for the city, even though it might be a proper police regulation for the State, counsel referred to the "General Welfare Clause" of the city's charter, and cited cases already decided showing the broad construction put by the courts thereon; and he further established the fact that even though by the general law of the State, a person could be proceeded against under State authority before a Justice of the Peace, that did not prevent a corporation from making and enforcing a local regulation on the same subject. The Court rendered judgment against the defendant, assessing a fine of $50.00 and costs. It seeems not unlikely that an appeal to a higher court will be taken and no stone left unturned to secure a reversal. But a victory has been won, one which should encourage the society to proceed along this line until the city is rid of such advertisers.

PUBLICATION COMMITTEE.

During the past month the Publication Committee has received a number of communications from members regarding advertisements, also the following resolutions from the Cass County Medical Society, "Resolved that the Cass County Medical Society request the Committee on Publication to admit the advertisement of no proprietary remedy to the pages of the JOURNAL OF THE MISSOURI STATE MEDICAL ASSOCIATION, except such as are accompanied by complete formula."

It is with much pleasure the Publication Committee recognizes the active interest of the members of the Association in the JOURNAL. As members of the Association, therefore part owners of the JOURNAL, they should offer such criticism as will result in the betterment of our official organ. Last September the Publication Committee held a meeting and ordered all advertisements of proprietary remedies intended for internal administration, where for-

mula does not accompany, omitted from the advertising columns. As soon as the present contracts expire no advertisements will appear which do not comply with the above ruling. A meeting of the committee will be called to pass upon all advertisements and no contract will be made until after copy of advertisement has been submitted to and approved by the committee.

THE JEFFERSON CITY MEETING.

The program for the annual meeting of the State Association is being prepared. Secretaries of Medical Societies are requested to forward without delay to the Chairman of the program committee, titles of papers to be read at the annual meeting.

It is hoped every component society will be represented. The meeting place being well located and our membership more than two thousand we should have at least seven hundred in attendance.

OBITUARY.

Dr. C. W. Robertson of Ridgeway, Mo., died in San Antonio, Texas, on Monday, December 11th. He had gone to Texas in the hope that a change of climate would prove beneficial to him and lengthen life's span for a time at least. But alas, the great white plague would not yield to either climate or medicine and claimed its victim.

Dr. Robertson was born in the state of New York near Niagara Falls. When a young man he graduated from the Buffalo Medical College and then settled in Ridgeway, Mo.

At first he taught school near Ridgeway but soon opened an office and began active general practice which he followed for twenty-five years without interruption until failing health compelled him to retire.

As a business man he was successful and public spirited. No enterprise for the improvement and betterment of our city failed to receive his support.

As a physician he was thoughtful and studious, honorable, manly. As a consultant he was somewhat reserved yet ever ready to give an opinion when requested to do so.

In the death of Dr. Robertson Harrison County Medical Society has sustained a great loss. He was a member of every society that has been organized in the county. A believer in the power for good of a well ordered medical society, he was of the first to foster and promote when an attempt was made to organize and the last to give up the struggle when interest waned.

W. H. W.

COUNTY SOCIETY NOTES

BATES COUNTY MEDICAL SOCIETY.

Dr. A. E. Lyle, President.
Dr. E. N. Chastain, Secretary.

Bates County Medical Society held its regular meeting in Butler on December 14th. There was a good attendance of the members and the meeting was a very interesting one.

Several cases were presented and the conditions discussed by all present. This was one of the most enthusiastic meetings ever held in Bates county and all who attended felt that they had been much profited.

The election of officers for 1906 resulted as follows: President, J. R. Coulson, Spruce; vice-president, T. F. Lockwood, Butler; secretary-treasurer, E. N. Chastain, Butler; delegate, A. E. Lyle.

The following were appointed to prepare papers for presentation at the next annual meeting of the State society: Drs. T. F. Lockwood, E. N. Chastain and Miller.

E. N. Chastain, Secretary.

BUCHANAN COUNTY MEDICAL SOCIETY.

Dr. P. I. Leonard, President.
Dr. C. W. Fassett, Secretary.

The Buchanan County Medical Society met in open session, November 18th, the President, Dr. Leonard, in the chair. Invitations had been previously sent to the clergy and to the legal profession to meet with the society and discuss the methods of prophylaxis of venereal disease and the need of sexual education. Dr. Chas. G. Geiger read a paper on "The Prophylaxis and Sequalæ of Venereal Disease."

Dr. Geiger began by stating that gonorrhoea and syphilis, two very widely spread diseases, are most frequently attendant on harlotry. That at the present time gonorrhoea had come to overshadow syphilis in its baneful influences, causing as it does sterility, inflammation of the uterus and adnexa and often fatal peritonitis, endocarditis and septicaemia. Various statistics were quoted, among others those of Noeggerath showing that of every thousand men married in New York City 800 had had gonorrhoea; those of the commission appointed by the American Medical Association showing that 42 per cent of all gonorrhoeal subjects became sterile, and those of Price showing that of 1,000 abdominal operations in women, 85 per cent were for the cure of conditions due to gonorrhoea.

Dr. Geiger then stated that he believed that by educating the people to the great danger of venereal diseases and by teaching the outlines of the physiology of the genito-urinary organs in the high schools and literary universities and by evening lectures to the working people, much could be accomplished in

preventing the spread of these diseases. Educate the individual as every one must make his own, or her own, morals. Teach scientific facts in a systematic, concise and acceptable manner so that men and women will see the need of protecting themselves.

Dr. Chas. Wood Fassett read a paper entitled "The Need of Sexual Education." Dr. Fassett said that today we behold the appalling spectacle of the youth of our land reared in almost total ignorance of his procreative powers and indulging in various indiscretions before he has reached the age of eighteen; of girls reared in the lap of motherly love surrounded by a veil which conspires to darken everything connected with their reproductive organs and as a consequence they often enter the matrimonial state with little or no knowledge of its demands or responsibilities. That budding nature of youth stimulated an abnormal curiosity and if we do not supply the natural amount of information concerning the functions of the procreative organs this knowledge will be obtained through the medium of lewd companions, obscene pictures etc., thereby generating a depraved and perverted taste for forbidden fruit. That sexual education is not wrong and that today our system of education does not provide instruction along these lines. As a remedy for these conditions Dr. Fassett urged education. Teach the youth elementary physiology and anatomy of the stomach, heart, etc., and at the proper time, the structure and function of the sexual organs. He also thought that at present the tenor of sentiment was changing and that a move toward education had already begun to manifest itself and that people were demanding education on these topics and clean literature for their families.

These papers were freely discussed by members of the society and by the visiting clergymen, lawyers and teachers.

CLARENCE GOOD, Reporter.

CASS COUNTY MEDICAL SOCIETY.

Dr. R. D. Ramey, President.
Dr. J. S. Triplett, Secretary.

The regular quarterly meeting of the Cass County Medical Society was held at Harrisonville, December 7, 1905, the President, Dr. R. D. Ramey, in the chair.

A paper on "The Physician as a Business Man" was read by Dr. W. F. Chaffin of Raymore. This was an excellent paper and was discussed at length by Drs. Dawson, Overholser, Brierly, Triplett, Farrow, Crawford, Schoor and Elder.

Dr. M. P. Overholser, Harrisonville, read a report of the Committee on Public Health and Legislation, which set forth the steps which have been taken toward the prosecution of illegal practitioners in the county. This report clearly and emphatically demonstrated that it is no fault of the regular medical profes-

sion that these offenders have not been brought to trial and legally punished, but that the fault lies with the legal arm in not enforcing the law, promptly and energetically.

Dr. M. P. Shy of Knobnoster, president of Johnson County Medical Society, was a visitor at this meeting and upon a unanimous vote of the society to participate in the discussion, made suggestive remarks upon questions before the society.

It was moved that a committee composed of the president, vice-president and secretary draw up a set of resolutions setting forth the earnest desire of the Cass County Medical Society to bring to trial the case of the State of Missouri vs. McCleary without further continuance and to present the same to the prosecuting attorney. Seconded and carried.

It was moved, seconded and carried that the society extend a vote of thanks to Dr. H. Jerard, of Pleasant Hill, for his efforts in causing the arrest, conviction and fine of "Dr." J. T. Davis for practicing medicine illegally at Pleasant Hill.

Dr. H. S. Crawford, of Harrisonville, read the resolutions endorsing the fight which *Collier's Weekly*, *The Ladies Home Journal* and other high class publications are making against the nostrum evil, which were adopted by the society.

Dr. J. S. Triplett presented a set of resolutions asking the Committee on Publication to admit the advertisements of no proprietary remedies to the pages of the Journal of the Missouri State Medical Association unless such advertisements are accompanied by their complete formulæ, provided such formulæ have been corroborated by the Council of Pharmacy and Chemistry of the American Medical Association. These resolutions were unanimously adopted by the society.

Dr. R. D. Ramey addressed the Society as retiring president. A quiz on Fractures and Dislocations of the radius and the ulna was conducted by Dr. A. R. Elder.

Dr. H. S. Prentiss, of Pleasant Hill, was elected to membership upon presentation of a transfer card from the Jefferson County Medical Society.

Dr. J. C. Belcher, of Pleasant Hill, made application for membership which was referred to the board of censors.

The secretary presented the following data for 1905:

Total number members	30
Members lapsed during year	3
Members died	1
Members removed from county	3
New members received	1
Members in county	27
Physicians in county not members	20
Total number of physicians in county	47
Cash on hand Dec. 1, 1905	$25.75

The society extended a vote of thanks to the retiring president and secretary for faithful service performed.

The following resolutions were

unanimously adopted:

Whereas, The American people are being daily humbugged, robbed and poisoned by venders of patent nostrums, and that largely through the medium of the press, and

Whereas, through their fearless, scathing and denunciatory editorials *Collier's Weekly* and *The Ladies Home Journal* are doing excellent good in their commendable campaign against these fraudulent schemes, be it

Resolved, That the Cass County Medical Society extend its heartiest thanks and highest commendations to P. F. Collier & Son and the Curtis Publishing Company for their splendid work. And be it further

Resolved, That copies of these resolutions be furnished the Editors of *Collier's Weekly*, *The Ladies Home Journal*, *The Journal of the American Medical Association* and the *Journal of the Missouri State Medical Association.*

The following officers were elected for 1906:

President, G. W. Farrow; vice-president, H. A. Brierly; secretary and treasurer, W. F. Chaffin; delegate, J. S. Triplett; reporter, W. F. Chaffin.

The Society adjourned to meet at Belton on the first Thursday in March, 1906.

J. S. Triplett, Reporter.

CHARITON COUNTY MEDICAL SOCIETY.

Dr. H. C. Tatum, President.
Dr. C. A. Jennings, Secretary.

The Chariton County Medical Society held its regular monthly meeting in Salisbury, November 16th. The meeting was called to order by the president. The minutes of the last meeting were read and approved.

Dr. Burton read an excellent paper on "Pneumonia and its Treatment." The discussion which followed was both interesting and instructive.

Dr. J. H. P. Baker presented a patient, a negro man about 30 years of age, suffering from a gunshot wound of the left knee.

On motion a committee was appointed to make up a year-book of the meetings for the year 1906.

By unanimous action it was decided that the society have a banquet at its December meeting.

The next meeting will be held on December 21st.

W. L. Baker Reporter.

CLINTON COUNTY MEDICAL SOCIETY.

Dr. John Sturgis, President.
Dr. E. A. Colley, Secretary.

The Clinton County Medical Society met in Plattsburg, December 5th, with a fair attendance of the

members, the meeting being called to order by the president. The minutes of the last meeting were read and approved.

This being a business meeting the society proceeded to the election of officers which resulted as follows: President, John Sturgis, Perrin; vice-president, G. B. Bush, Lathrop; secretary-treasurer, E. A. Colley, Plattsburg; censor for three years, John Kay, Perrin.

After the election the society adjourned to partake of a dinner prepared by the entertainment committee.

The next meeting will be held in Plattsburg, January 2, 1906.

E. A. Colley, Secretary.

COOPER COUNTY MEDICAL SOCIETY.

Dr. P. L. Hurt, President.
Dr. J. R. Lionberger, Secretary.

The Cooper County Medical Society met in Boonville on December 5th, 1905, at the W. O. W. rooms. Members present: Drs. P. L. Hurt, F. R. Smiley, A. J. Smith, R. L. Evans, O. W. Cochran, J. T. Taylor, Jno. R. Lionberger.

President P. L. Hurt called the meeting to order. The minutes of the former meeting were read and approved.

The subject of a fee-bill was brought up and freely discussed by all members present; however nothing definite was determined upon as such a subject seemed difficult to decide. All the members present agreed that a uniform charge should be adopted, and that in the near future the profession of Cooper county would arrange a fee-bill of uniform charges.

The annual election of officers was then held with the following results:

President, O. W. Cochran, Gooch Mills; vice-president, F. R. Smiley, Boonville; secretary and treasurer, Jno. R. Lionberger, Boonville; member of board of censors for three years, A. L. Meredith, Wooldridge; committee on public health and legislation, Drs. F. R. Smiley, P. L. Hurt and A. J. Smith.

The name of Dr. H. A. McDonald of Pisgah was presented for membership and referred to the Board of Censors.

There being no further business, the Society adjourned to meet January 2, 1906.

John R. Lionberger, Secretary.

THE GRAND RIVER MEDICAL SOCIETY.

The thirtieth annual meeting of the Grand River Medical Society convened in Chillicothe on Thursday, December 7th, 1905. The meeting was well attended by the members with quite a number of visitors and honorary members from Kansas City and St. Joseph. Following is the program which was carried out: 1. Modern Methods of Removing Foreign Bodies from the Upper Air Passages, by Hal Foster,

of Kansas City. 2. Sudden Death During or Shortly after Termination of Pregnancy, by Tinsley Brown, of Hamilton, Mo. 3. Appendicitis, by O. Beverly Campbell, of St. Joseph. 4. Appendicitis, by H. C. Crowell, of Kansas City. 5. Pneumonia and its Treatment, by H. M. Grace, of Chillicothe. 6. Enlarged Prostate, by J. Block, of Kansas City. 7. Treatment of Dacryo-Cystitis, by Flavell B. Tiffany, of Kansas City. 8. Non-Calculous Obstruction of the Common Bile Duct, by A. H. Cordier, of Kansas City. 9. Remarks by the Retiring President, by J. A. Waterman, of Breckinridge, Mo.

These papers were all meritorious and were ably discussed. This was one of the most interesting sessions held by this society for many years. Quite a number of new members were added.

The following officers were elected for the year 1906: President, J. F. Cherrington, Chillicothe; vice-president, C. C. Leeper, Braymer; secretary, A. J. Sampson, Chillicothe. The next meeting will be held at Hamilton, Mo., in December, 1906.

HENRY COUNTY MEDICAL SOCIETY.

Dr. W. M. Shankland, President.
Dr. F. M. Douglass, Secretary.

The Henry County Medical Society met in regular session at Clinton on December 13th. The president called the meeting to order the following members being present: Drs. Shankland, Benway, Head, Fanner, Barr, Haire and Douglass.

Dr. Haire read a paper on better county organization. Discussion of the paper was general each member giving his views of the best way to arouse the interest of members. It was suggested that reciprocal relations be established with some other county, the meetings held in different months and then take the best feature from one society and present it at the meeting of the other. The quiz was advocated, one member to be quiz master, the subject selected and published and each physician in the county notified. Dr. Head thought the meetings would have been of more general interest if those who had been appointed to read papers had attended and read a paper or presented cases, and if those members living close by had attended the meetings. Even some of the physicians in Clinton had failed to attend.

The election of officers for 1906 resulted as follows:

President, H. W. Benway, Deepwater; vice-president, C. W. Head, Windsor; treasurer, R. D. Haire, Clinton; secretary, F. M. Douglass, Clinton; censor, B. B. Barr.

Dr. W. C. Farrar, of Montrose, was elected a member.

F. M. Douglass, Secretary.

HOWARD COUNTY MEDICAL SOCIETY.

Dr. A. W. Moore, President.
Dr. C. W. Watts, Secretary.

Howard County Medical Society

met in the office of Dr. Wright at Fayette on November 21st. Interest in the Society seems to be lagging somewhat as there were but four members present. These were Drs. Bonham, Wright, Smith and Watts. The president, Dr. A. W. Moore, was unable to be present on account of illness. He has been suffering for some time from an attack of dysentery but is now recovering.

Dr. Smith presented an interesting case of gun-shot wound of the chest. A full report of the case is promised for the next meeting.

Dr. C. H. Lee has had remarkable success in the treatment of epithelioma of the eye in a patient seventy-five years of age. The growth was removed several weeks ago. It covered the inner canthus of the eye and weighed about three ounces. There was considerable hemorrhage at the time of removal but this was controlled with adrenalin. Later the x-ray was applied and the wound has healed, leaving but a small cicatrix. The patient says he sees better than he has for thirty years. This is the second successful operation which Dr. Lee has performed recently in this condition. We hope he will report these cases in full at a future meeting of the Society.

Dr. Bonham of Franklin reported an interesting case of salpingitis. Dr. Wright will report on some recent cases of tuberculosis at the next meeting. Dr. Watts spoke of the success which he had met in the treatment of typhoid fever and chronic dysentery by instituting antiseptic treatment early in the disease. He believed the day was not far distant when typhoid fever would never pass the congestive stage as he thought the disease would be controlled by proper administration of internal antiseptics.

MEETING OF DECEMBER 5TH.

Howard County Medical Society met in regular session at Fayette, in the office of Dr. Watts, on December 5th, at one p. m. The following members were present: Drs. Moore, Lewis, Lee, N. E. Smith, Bonham, Fleet, Williams, Champion and Watts. The minutes of the last meeting were read and approved.

Dr. Fleet presented a very interesting case of hepatic disease in a boy about four years old. The child had ascites which was relieved by large doses of jalap and pot. bitart. et oposcynum.

Dr. N. E. Smith reported a case of gunshot wound of the chest. The ball, .38 caliber, entered 1½ inches to the right of the sternum in the second intercostal space. It was removed between the scapula and the sixth dorsal vertabra. The wound was received about two weeks ago and several days ago he removed six ounces of a sero-sanguinous effusion from the right pleural cavity. The patient had a temperature which fluctuated between 100 and 103½ degrees and coughed up a tenacious sputum which contained some blood. Present condition: Appetite is improving, temperature 101¼ degrees,

says he feels better.

Dr. Williams presented a case of gunshot wound of the wrist in a young man of 18 years of age. After cleaning the wound he applied benzoin treatment and the patient has made good progress.

The society then proceeded to elect officers for 1906 with the following result: President, V. Q. Bonham; vice-president, N. E. Smith; secretary-treasurer, C. W. Watts; member of house of delegates, C. O. Lewis; censors, C. H. Lee and J. H Champion.

By unanimous vote the time of meeting was changed from the third Tuesday in each month to the first Friday.

C. W. Watts, Reporter.

HOWELL COUNTY MEDICAL SOCIETY.

Dr. J. W. Bingham, President.
Dr. H. C. Shuttee, Secretary.

Howell County Medical Society held its regular meeting on December 7th. It is with much regret that we must report no scientific work done at this meeting or at the meeting held in October. The essayists reported to read papers failed to attend the meeting or to send their papers to be read. It is hoped that with the New Year the members will renew their interest in the society and respond to requests for papers and attend the meetings.

It requires some sacrifice on the part of a busy doctor to forward the interests of the county society and make it a success, but every physician should be willing to contribute his effort to this end and if necessary, sacrifice time and the consideration of his personal comfort. Only by united action and common interests can the great objects in view ever be attained. It is hoped that the physicians of Howell county will not fall behind in the work of maintaining harmonious organization and a unification of interests in the state of Missouri.

The following officers were elected for the year 1906:

President, A. H. Thompson; vice-president, H. C. Shuttee; secretary A. H. Thornburgh; treasurer, J. McBride Johnson; delegate, J. W. Bingham.

H. C. Shuttee, Secretary.

JACKSON COUNTY MEDICAL SOCIETY

Dr. Robert T. Sloan, President.
Dr. Max Goldman, Secretary.

The Jackson County Medical Society held its regular meeting Thursday, November 9, 1905, Dr. H. O. Hanawalt in the chair.

The scientific program consisted of papers by Drs. A. E. Hertzler and Jos. W. Sherer, and the report of a case by Dr. Fred T. Van Eman.

Dr. Hertzler's paper was entitled "Sexual Neurasthenia, from the Standpoint of the Surgeon." The essay, which was thoroughly enjoyed by all present, though merely an introduction to the general subject of sexual functional disturbances, upon

which the doctor has been conducting some investigation, is to be commended for its striking originality and scientific character.

The definition suggested for the condition under consideration was "a pernicious nervous state, having a special cause as a rule, and referred to the sexual organs;" hence, not a true neurasthenia, or nervous exhaustion, but rather a sexual nervous affection due to a local condition What were called typical cases were described in a general way, and then irregular types due to different causes were spoken of. Special mention was made of the physical findings, the author stating that he always used the endoscope when he searched for local changes. Some abnormal conditions were always found in these cases; such as congestion of the mucous membrane, hypertrophy of the skin of the genitals, raw surfaces on the mucous membranes owing to the excessive congestions, the presence of abundance of oxalates in the urine, tenderness, local redness, etc. The prostatic urethra and the trigone of the bladder were quite often involved in the local changes.

As regards the treatment, circumcision was recommended as both prophylactic and curative; any other irritations should be removed. Though varicocele often accompanganic or psychical causation, or of resection did not relieve the primary disturbance. Bromides should be tried to control nervous symptoms and strychnine as a tonic, though if given early it might aggravate the condition. The local treatment was of course of greatest importance; the nitrate of silver in the strength of 1 per cent. was recommended; one should guard against using a too strong solution. The local treatment should be carried out patiently and intelligently, for other methods usually recommended are of little or no benefit.

The essayist reported some 20 cases; "ten belonging to the so-called intelligent class, six to the class below the average intelligence, representing the neurotics, and four others." Nearly all, he stated, had recovered.

The prognosis, he said, was usually good. In older individuals the condition seemed to be more obstinate; and the obese patients have been, in his experience, a failure. Where no special cause existed the prognosis was not so favorable.

Considerable discussion followed the reading of this paper, points of special interest being, (1) the name of the affection described, (2) its differentiation from the psychosis sexual hysteria, and (3) the precise etiology; i. e., whether it be of organic or psychial causation, or of both.

Dr. L. W. Luscher opened the discussion from the surgical view-point He stated among other things, that the local irritation was largely responsible for the nervous condition He mentioned also the "psycho-neu-

rotic sexual cases" ordinarily seen. Others taking part in the discussion were Drs. E. G. Mark, H. C. Hays, William Frick, H. D. Jerowitz, J. M. Langsdale, Carl Sandzen and H. O. Hanawalt. Dr. Hertzler closed the discussion.

Dr. Sherer's paper, while dealing with some of the rare as well as more common "Ocular Sequelæ of Diphtheria," was of special interest because of the report of a case of ciliary paralysis presenting atypical conditions. This case was characterized by anesthesia of the retinæ, and, briefly, presented the following features of interest: (1) paralysis of accommodation; (2) no involvement of the iris; (3) contraction of the visual field of each eye; (4) some alternating contraction of the visual fields due to anesthesia retinæ. The patient, aet. 17 years, recovered completely.

The doctor stated that the ciliary paralysis was due to a toxic neuritis in the peripheral nerves. He considered the pathology of the condition, and mentioned among other ocular sequelæ, paralysis of the various ocular muscles, orbital abscess, neuro-paralytic keratitis, et cetera. The prognosis was usually good. The treatment consisted of local measures and reconstructive tonics.

The paper was discussed by Drs H. H. Lock, H. D. Jerowitz, and W. M. Reed. Dr. Sherer closed the discussion.

Dr. Van Eman reported a case of "Atrophy of the Testicle." After the patient had suffered several attacks of acute inflammation of his right testis, evidences of atrophy began to develop until at the present time there is left merely a small hazel-nut sized organ. In the discussion, which proved of considerable interest in a general way, questions relative to the precise etiology and treatment were especially mentioned, though but little light was thrown upon the case under consideration. Drs. E. G. Mark, J. Q. Chambers, H. C. Hays and H. D. Jerowitz discussed the case reported, and Dr. Van Eman closed the discussion.

The society adjourned till its next regular meeting, November 23, 1905.

MEETING OF NOVEMBER 23RD.

The Jackson County Medical Society met in regular session November 23rd, 1905, the President, Dr. Robert T. Sloan, in the chair.

The professional program consisted of a paper by Dr. W. M. Reed, entitled "The Modern Treatment of Diseases of the Frontal Sinuses," and the report of a case of "Appendicitis with Complications," by Dr. H. C. Crowell.

Dr. Reed, in an original and instructive paper, gave first a general description of the frontal sinuses, and their relations to the neighboring sinuses. A consideration of the surgical treatment of sinus diesase followed, with the recommendation of the so-called conservative method of treatment. The essayist described his method of entering the fron-

tal sinus through the nasal chamber, and then reported a case of empyema of the frontal and maxillary sinuses in which great relief followed the establishment of drainage through the nasal passages. The doctor compared the value of some external radical operations on the frontal sinuses with the intranasal one and closed by again advising the conservative method of treatment. A number of excellent specimens of frontal, maxillary, and sphenoid bones illustrating the sinuses were exhibited.

Dr. J. F. Sawyer opened the discussion, Drs. H. G. Tureman, H. H. Look, T. S. Blakesley, C. D. Burke and Jos. S. Lichtenberg also taking part. Dr. Reed closed the discussion.

Dr. Crowell's report of a case of appendicitis was of unusual value from the standpoint of clinical instruction. As was well stated by the doctor, cases complicated and followed by an atypical train of symptoms, though they might terminate fatally occasionally, are nearly always of extremely great practical value. In the case reported, an operation for a periappendicular abscess in a woman aet. 34 years was performed in the ordinary manner; drainage was employed after some pus was removed. Following the operation the patient complained of some pain in the abdomen, the pain continuing to increase in severity; she vomited and belched considerably, and passed some gas from the bowels about the beginning of the second day; the pulse became rapid and continued to increase in rapidity though the temperature at no time was high. The patient continued doing badly for four days when upon exploration on the operating table by a second laparotomy, a portion of bowel was discovered attached to the bladder by recent adhesions; it was strangulated by reason of this, and, in addition, necrosed and perforated near the point of strangulation; all efforts to save the patient's life failed.

From a study of the progress of this case after the primary operative interference, giving as it does a clear history of ileus, what lessons one could learn! though it would be quite difficult, as was stated by the essayist, to differentiate such an ileus from a septic sequel of an operation for the condition here presented.

The discussion was opened by Dr. A. E. Hertzler. Drs. F. T. Van Eman, D. R. Porter and C. B. Hardin also taking part. Dr. Crowell closed the discussion.

The Society adjourned till its meeting December 14, 1905, the annual meeting.

Meeting of December 14th.

The Jackson County Medical Society held its annual meeting on December 14th.

The election of officers for the year 1906 resulted as follows:

President, Dr. E. B. Thrailkill; vice-president, Dr. C. H. Dove; Secretary, Dr. Max Goldman; treasurer, Dr. L. W. Luscher; delegates, Dr.

Herman E. Pearse, Kansas City; Dr. F. L. Cook, Blue Springs; Dr. W. J. Frick, Kansas City; Dr. J. M. Frankenburger, Kansas City; Dr. N. P. Wood, Independence.

The report of the various officers for the year 1905 indicates that the society has been making very satisfactory progress; the growth in membership and the character of the scientific work done by the society are both to be commended.

MAX GOLDMAN, M. D.,
Secretary.

JEFFERSON COUNTY MEDICAL SOCIETY.

Dr. W. H. Farrar, President.
Dr. H. Will Elders, Secretary.

The regular meeting of Jefferson County Medical Society was scheduled for November 28th. As there were not enough members present to form a quorum no business was transacted. Those attending enjoyed the evening in social conversation on various topics.

H. WILL ELDERS, Secretary.

JOHNSON COUNTY MEDICAL SOCIETY.

Dr. M. P. Shy, President.
Dr. E. H. Gilbert, Secretary.

The regular meeting of Johnson County Medical Society was called to order by the president in Warrensburg, on December 12th. There was a good attendance of the members and one new member was elected.

The program for the evening had been mailed to all members and each one who had been appointed to read a paper was ready with his contribution. Dr. T. L. Bradley read a paper on "Tracheotomy *vs.* Intubation." The discussion on this paper was opened by Dr. W. Thompson. Other papers were read by Dr. John T. Anderson, Dr. O. B. Hall and Dr. Wm. H. Aber.

The following officers were elected to serve during 1906: President, T. L. Bradley, Warrensburg; vice-president, L. J. Schofields, Warrensburg; secretary, E. H. Gilbert, Warrensburg; treasurer, C. B. Mall, Warrensburg; censor, Wm. H. Aber, Montserratt; delegate, J. I. Anderson, Warrensburg.

The reports of the secretary and the treasurer showed the society was in a flourishing condition.

Dr. M. P. Shy, retiring president, was selected to read a paper before the Jefferson City meeting of the State Association.

E. H. GILBERT, Secretary.

KNOX COUNTY MEDICAL SOCIETY.

Dr. L. S. Brown, President.
Dr. H. Jurgen, Secretary.

The regular meeting of the Knox County Medical Society was held on December 4th, Dr. James Myers in the chair. The minutes of the previous meeting were read and approved.

A communication from the secretary of the state association was read in regard to papers for the next

annual meeting of the state association.

The treasurer submitted a report of the expenses incurred and on motion the accounts were allowed.

For the next meeting the president assigned papers to Drs. Arnett, of Novelty, and F. E. Luman, of Baring.

The officers were elected for 1906 as follows: President, L. S. Brown (re-elected); vice-president, R. J. Northcutt; secretary-treasurer, H. Jurgen (re-elected); censor for three years, H. H. St. John.

On motion Dr. Jurgen was requested to prepare a paper for the meeting of the state association at Jefferson City next May.

A vote of thanks was tendered the officers for the efficient work done by them during the year.

The next meeting will be held on the first Monday in February, 1906:

H. Jurgen, Secretary.

LINCOLN COUNTY MEDICAL SOCIETY.

Dr. S. R. McKay, President.
Dr. W. P. Smith, Secretary.

The Lincoln County Medical Society met in regular session at Troy on Nov. 9th, 1905. After reading minutes, and regular routine work was disposed of, the scientific program was taken up.

Dr. L. Pendleton read a paper on "The Use and Abuse of Some Drugs. Especially Quinine and Arsenic." Digitalis and the two drugs named brought out a general discussion. By invitation Dr. Tainter of St. Charles read a paper on "Some Peculiar Forms of Hernia," which was enjoyed by the society, especially the remarks on different diagnosis.

Dr. C. D. Avery read a paper on "Abortion," which was very thorough, and brought out much favorable comment.

W. P. Smith, Secretary.

MARION COUNTY MEDICAL SOCIETY.

Dr. R. H. Goodier, President.
Dr. F. Janet Reid, Secretary.

The regular meeting of the Marion County Medical Society was called to order by the president on December 1st. The attendance was good.

The topic for discussion was "The Relation of Membranous Croup and Diphtheria." Dr. R. Schmidt opened the discussion and during his remarks mentioned a number of cases of the two forms of the disease, on some of which he had performed tracheotomy with success. He laid special stress upon the early and free use of antitoxin in both laryngeal and pharyngeal manifestations of the disease. Others followed in the discussion and all seemed to be of one opinion concerning the identity and etiology of the two forms, namely, the Klebs-Loeffler bacillus. Some difference of opinion developed as to the relative contagiousness of the laryngeal and the pharyngeal varieties some of the members believing the former less contagious than the latter. The merits of intubation and

tracheotomy were discussed at some length.

Dr. Baskett stated that in seven intubations done for obstruction from diphtheria and other causes he had been able to save five patients from impending death. The difficulties attending the making of tracheotomies and intubations were discussed and it was stated that usually the surroundings of the patient were wholly unpromising.

Dr. E. H. Bounds related a case of a child with a fracture of the radius without fracture of the ulna.

Dr. W. H. Mays reported a case of pneumonia in a man past sixty years of age. He saw the patient on the sixth day of his illness and found him sitting up in bed, the temperature being 102½ degrees. There was consolidation of the right lung. The crisis came during the night accompanied with profuse perspiration. On a second visit the temperature was normal and convalescence had begun. The patient was an alcoholic.

Dr. Thos. Chowning reported a case of labor that was uneventful until the eighth day after confinement when the patient was siezed with a sudden and severe pain in the right lumbar region, temperature 102.2 degrees, pulse 120. The pain was relieved by a hypodermic injection of morphine. On the following day there was a similar attack on the left side which pursued the same course. The cause was obscure.

Election of officers for 1906 resulted as follows: President, R. Schmidt; vice-president, F. W. Bush; secretary-treasurer, H. L. Banks; reporter, E. H. Bounds, delegate, Thos. Chowning; censor, J. J. Bourn.

H. L. Burks, Reporter.

MONITEAU COUNTY MEDICAL SOCIETY.

Dr. J. B. Stewart, President.
Dr. W. R. Patterson, Secretary.

Moniteau County Medical Society met in regular session in California on December 14th. The meeting was called to order by the vice-president, Dr. A. V. Thorpe. Members present: Drs. A. V. Thorpe, H. C. Kleuber, H. Freudenberger, J. M. Robertson, J. B. Norman, J. E. Inglish, J. P. Burke, W. R. Patterson.

The minutes of the last meeting were read and approved. Dr. L. L. Latham was elected to membership.

The committee appointed to report on a schedule for a fee-bill made their report. On motion the secretary was ordered to have a fee bill printed and to mail a copy to each member with the request that prices be set down as suggestions for consideration at the next meeting.

The following officers were elected to serve during 1906: President, J. M. Robertson, Latham; vice-president, A. V. Thorpe, Jamestown; treasurer, H. C. Kleuber, California; secretary, W. R. Patterson, Tipton; censor, H. Freudenberger, Centertown; delegate, W. R. Patterson, Tipton.

On motion the society requested Dr. J. B. Norma, of California, to prepare a paper at the next meeting of the State Medical Association at Jefferson City in May, 1906.

The next meeting will be held in California, March 8, 1906.

W. R. Patterson, Reporter.

MONTGOMERY COUNTY MEDICAL SOCIETY.

Dr. J. L. Jones, President.
Dr. W. M. Wheeler, Secretary.

Montgomery County Medical Society held a meeting at Montgomery City on December 12th, the president, Dr. Jones, in the chair. After reading the minutes of the previous meeting and disposing of miscellaneous business matters, the scientific program was taken up.

Dr. G. E. Muns read a very excellent paper on "Lobar Pneumonia in Infants and Young Children." The discussion was opened by Dr. Nowlin followed by Drs. Hudson, Jones and Wheeler.

The hour of adjournment having arrived, Dr. Nowlin was requested to present his paper on "Tubercular Arthritis" at the next meeting which will be held at Montgomery City on the afternoon of the second Tuesday in February, 1906.

W. M. Wheeler, Secretary.

NEWTON COUNTY MEDICAL SOCIETY.

Dr. J. W. Lamson, President.
Dr. Horace Bowers, Secretary.

The Newton County Medical Society met in the office of Dr. Bowers, at Neosho on December 12th. The meeting was called to order by the president. The minutes of the last meeting were read and approved.

The election of officers for the ensuing year resulted as follows: President, R. L. Wills, Marshall; vice-president, P. C. Yates, Neosho; secretary, Horace Bowers, Neosho.

Dr. Doty presented a case of obstinate eczema of the leg in a child eight months old.

Dr. J. B. Hancock read an excellent paper on "Puerperal Fever." This paper brought out a lengthy discussion in which all the members participated. Many cases were reported during the discussion and the members expressed themselves as being much benefitted by the reading of the paper and the discussion which followed.

A program for the next meeting was arranged to consist of interesting clinical cases, a paper by Dr. William Campbell on "Placenta Previa" and a paper by Dr. R. L. Wills on "Rectal Alimentation."

The interest in these meetings is growing steadily, this meeting being one of the best that we have held. Eighteen members were present lacking only five of being a full attendance.

Horace Bowers, Secretary.

PLATTE COUNTY MEDICAL SOCIETY.

Dr. R. P. Davis, President.
Dr. G. C. Coffey, Secretary.

The regular monthly meeting of

Platte County Medical Society was held in Platte City, December 6th, 1905.

The following physicians were in attendance: Drs. C. H. Chastain, Spence Redman, Virgil Morrison, H. M. Clark, R. P. C. Wilson, A. S. Herndon, H. H. Patterson, Alma Naylor, E. McD. Coffey, W. H. Smedley, R. P. Davis, G. C. Coffey.

After an elegant dinner at the Central Hotel, the Society was called to order by the president in the office of Dr. Spence Redman. Dr. Naylor, of Platte City, opened the discussion on "Pneumonia." He said we should observe strict rules in regard to the diet; should give patient plenty of fresh air; watch secretions closely; treat symptoms as they arise. He thinks more harm than good is done by trying to reduce the temperature. Always carefully watch the heart and when called for, use alcohol and strychnine, but use them carefully. Cold baths are best to reduce the temperature.

This subject was discussed very fully by all physicians present.

Dr. Alma Naylor of Platte City and Dr. Virgil Morrison of Iatan were admitted into the Society. Dr. S. Redman, treasurer, made his annual report which showed we were slightly behind in finances.

Dr. G. C. Coffey, secretary, made his annual report showing a membership of 16 for the beginning of the next year. Moved and seconded that our annual dues be increased from $3.00 to $3.50. Carried.

The application of Dr. H. M. Clark, of Platte City, was received and referred to the board of censors.

Moved and seconded that Dr. Chastain, of Weston, deliver an address at our next meeting in January. Carried.

The election of officers resulted as follows: President, C. H. Chastain, Weston; vice-president, A. C. Barr, Linkville; secretary, G. C. Coffey, Platte City; treasurer, Spence Redman, Platte City; censors, R. P. Davis, Woodruff; delegate, Spence Redman, Platte City.

The following resolutions were adopted:

Whereas, Death has removed from earthly scenes the father of our esteemed co-worker and member of this Society, Dr. A. S. Herndon, be it therefore Resolved, That the members of this Society extend to him and his family our sincere sympathy in this hour of their sad bereavement. And resolved further, that these resolutions be spread upon our minutes and that a copy thereof be furnished to the family of Dr. A. S. Herndon.

Adjourned until January 3, 1906.

G. C. COFFEY, Secretary.

ST. CHARLES COUNTY MEDICAL SOCIETY.

Dr. J. R. Mudd, President.
Dr. B. K. Stumberg, Secretary.

The quarterly meeting of the St. Charles County Medical Society was held on October 3, 1905. The minutes of the previous meeting were read and approved. The regular order of business was suspended and

the report of the board of censors was read. The applications of Drs. O. A. Muhm and H. N. Corley were favorably reported upon and both were elected by ballot. A motion was then made that the president appoint members to read papers at the next meeting. Motion carried.

Dr. Hardy read a paper on "Appendicitis and Diseases of the Peritoneum." The paper was discussed at length by all members present.

There being no other papers, the society proceeded to elect new officers. The election resulted as follows: President, J. R. Mudd; vice-president, F. P. Dunn; secretary, B. K. Stumberg; treasurer, Carl Bitter; censor, B. P. Wentker.

There being no further business the society adjourned to meet on the first Tuesday of January, 1906.

B. K. Stumberg, Secretary.

ST. GENEVIEVE COUNTY MEDICAL SOCIETY.

Dr. M. Andre, President.
Dr. F. E. Hinch, Secretary.

The St. Genevieve County Medical Society met in the office of its secretary December 11, 1905, with a good attendance of members.

Dr. G. M. Rutledge read a paper criticising an article in the National Druggist of December, 1905, reflecting on the integrity and ability of physicians. This paper was discussed freely and a committee appointed to draft resolutions relative thereto and report at the next meeting.

New officers were elected to serve the following year: President, C. Moore; vice-president, F. E. Hinch; secretary and treasurer, R. W. Lanning.

Dr. N. W. Jarvis was elected to membership in the Society.

The meeting adjourned to meet January 10, 1906.

F. E. Hinch, Secretary.

ST. LOUIS MEDICAL SOCIETY

Dr. F. L. Henderson. President.
Dr. T. A. Hopkins, Secretary.

The St. Louis Medical Society has convened in regular session six times since November 25th. The following papers, addresses, etc., have been presented:

Meeting of November 25th.

The scientific program for this meeting was a lecture by Dr. H. W. Loeb, on "The Anatomy of the Nose and Accessory Cavities," illustrated by numerous drawings, skulls, and a number of sections of the cranium and its contents, each about one-half an inch in thickness, by means of which the head might be built up or torn down at will, and the relationship of the different parts shown as it could be in no other way. These sections were made by Prof. Potter and are used by him in teaching anatomy at the Medical Department of St. Louis University; here they make use of sections, not only of the cranium, but of the entire body, in studying the relationship of the various parts. They are made by first hardening and preserving the body in formalin, then decalcifying by means of hydrochloric acid, after

which with an ordinary knife it may be cut in sections of the desired thickness, usually about one-half inch. The demonstration was unique and thoroughly enjoyed by all present.

MEETING OF DECEMBER 2ND.

At this meeting Dr. W. G. Moore offered the following resolution:

"Resolved, That the St. Louis Medical Society heartily endorse *Collier's Weekly* and *The Ladies' Home Journal* for the splendid stand they have taken against the great American evil—secret nostrums, commonly known as patent medicines; that copies of this resolution be transmitted to them, and that they be authorized to use same in any manner they may consider advantageous."

After an enthusiastic discussion the resolution was unanimously adopted.

The scientific program for the evening consisted of a paper entitled, "Cervical Lacerations and Their Repair," by Dr. Davis Forster. The doctor gave an excellent description of the pathological conditions found in these cases and advised that all cervical tears, no matter how slight, be repaired, if for no other reason than as a prophylactic measure against cervical carcinoma. The paper called forth a very interesting and thorough discussion by Drs. Dorsett, Funkhouser, Kieffer, Morris and Laidly, illustrated by blackboard drawings.

MEETING OF DECEMBER 9TH.

At this meeting Mr. F. R. Cornwall, patent attorney, by invitation read a paper, entitled "When is a Patent Medicine Not a Patent Medicine." He said that, according to law, a medicine to be patented must be a new and useful product, the formula and method used in manufacture must be furnished, and are placed on record, which record is open to the public; the patent vests the property right in the patentee for a period of seventeen years, after which it becomes public property and anyone may then manufacture and sell it. When we consider the method used to determine whether it is new and useful, the inspector simply looking over the records in the patent office to determine the former, and guessing at the latter; also, that the patent office has no means of knowing if it is made true to formula, we see what a farce it really is. In proprietary medicines, the property right is vested in the name, which is copyrighted; anyone may manufacture them but cannot sell them under that name, but may market them under some other name. Secret nostrums are those where the formula and method of manufacture are both kept secret, and are the most numerous as well as most reprehensible.

After a very general discussion, a vote of thanks was given Mr. Cornwall.

The second paper of the evening, "Man and His Economic Relation to the Earth," by Dr. Geo. Homan, was an interesting one. While more socialistic than medical in its bear-

ing, the doctor made one statement in which all medical men are interested, but with which few will agree, viz., that economic conditions are to a great extent responsible for the enormous increase in the number of abortions; that the cost of living is so high that an addition to the family becomes a serious matter, and many seek to avoid it by resorting to criminal abortion. The paper was discussed by Drs. Barclay, Kieffer and Morris.

MEETING OF DECEMBER 16TH.

Paper, "Congenital Dislocation of Hip, with Report of Cases," by Dr. Nathaniel Allison. He said that thirty years ago this was considered an incurable deformity, but with methods now used there were very few cases which could not be greatly benefitted and from thirty to forty per cent. cured. The method first used was an apparatus with prolonged extension; the result, a small per cent. of cures. Next the cutting operation with a larger per cent. of recoveries, but the method now given preference is that of manipulation as practiced by Dr. Lorenz, and which gives the largest per cent. of cures. This treatment should always be given the preference, and the cutting operation only resorted to after failure of repeated attempts at reduction by manipulation. A partial reduction by manipulation gives a more useful limb than an anatomical reposition with ankylosed joint, which so often follows the cutting operation. He thinks the cause of such a large per cent. of unsuccessful cases is the lack of attention to the after-treatment, the head of the femur being allowed to slip out of the acetabulum after it had been replaced. These cases should be kept in plaster of Paris bandages for six months after reduction. The doctor reported eleven cases, seven of which were double, with fifty per cent. cured. He illustrated his paper by showing a number of radiographs taken before and after treatment, and the pelvis of a child who had a congenital dislocation of hip.

The paper was discussed by Drs. Hoffman, Steel, Kieffer.

Dr. J. Y. Brown presented specimens removed by operation, from two cases of acute appendicitis. He stated that this is always a surgical disease, and advised early operation in all cases. While there is still quite a difference of opinion between the surgeon and the internist in regard to this subject, the one saying always operate and early, the other claiming that the majority of these cases will get well without operation, the difficult point to decide, is, which cases will recover without operation and which cases must be operated on, we probably have no better rule to go by than this—the cases demanding operation inside of 24 hours from the commencement of the attack are exceptional, but a case which is not practically well at the end of that time should be made the subject of operative interference.

MEETING OF DECEMBER 23RD.

In a paper entitled "Medical Observations in the Far East," Dr.

Mary H. McLean gave a very interesting description of medical practice as she observed it in China, Korea and Japan.

I. E. GRAHAM, Reporter.

ST. LOUIS COUNTY MEDICAL SOCIETY.

Dr. H. G. Wyer, President.
Dr. H. T. Randle, Secretary.

The St. Louis County Medical Society met in the office of Dr. John Pitman, at Kirkwood, on November 15th. The president, Dr. Wyer called the meeting to order. The following members were present; Drs. Wyer, Randle, Armstrong, Higgins, Thurman, Forsythe, Guibor, Douglas, Pitman, Dunnavant, Cape, Townsend and Moore.

The minutes of the last meeting were read and approved. The committee on circular letter not being ready to report was granted further time. The committee on banquet for the December meeting reported having made arrangements to meet at the Mercantile club in St. Louis. The report was accepted and the committee was empowered to complete final arrangements. The committee appointed to draft new by-laws reported and the report was filed for action at the next meeting.

Dr. R. C. Forsythe read a paper on "Polymastia." Dr. Moore reported a case of fracture of the cervical vertebrae and presented a specimen of same.

Dr. Forsythe's paper was as follows:

POLYMASTIA.

Supernumerary breasts as observed by the general practitioner are more a curiosity than an abnormality requiring medical or surgical interference. However there are certain points to be considered in their relationship to the body, their similarity to other conditions, and the discomfort they may cause either by their position upon the body or the psychical effect on the individual.

Julia, the mother of Alexander Severus, was surnamed "Mammæ" because she had supernumerary breasts. Anna Boleyn, the unfortunate wife of Henry the VIII of England, was reputed to have had three breasts. Diana is portrayed with numerous breasts, indicating her ability to look after the growing child. Rubens pictured a woman with four breasts.

Although the term polymastia means multiple breasts, it is used to cover the whole field of misplaced breasts and is not confined only to multiple developed breasts.

When the supernumerary breasts are developed, they generally appear in pairs, their site being below the normal breasts and somewhat nearer the median line. Next in frequency, near the axilla. In unilateral cases, the left side of the body is more frequently chosen. Two cases of supernumerary breasts on the back, two on the shoulder with nipples, one upon the epigastrium, one upon the thigh, one upon the labia majora, have been reported respectively by

Klobs, Hirst, Leichtenstern, Roberts and Hartung. Supernumerary glands may vary widely, from a small mole that may be overlooked, to a fully developed organ.

Roth reports a case in a mulatto where the third breast was six inches across in diameter, provided with nipples and areola, yielded milk, and the functional activity did not cause distress. Lyncous reports a case of a woman with four breasts in two vertical lines, and which gave milk abundantly. Gardner and Hare report similar cases where the glands were located in the axilla. Heredity seems to play a small part. Alexander reports a case of a mulatto with six nipples in a vertical line four inches apart. The patient's mother was reported to be malformed in the same manner, and several brothers and one sister had four breasts, but this was not conconfirmed. In Jusicu's case of three breasts, one in the groin functionated; the mother had three breasts on the chest. In Robert's case the breast was on the side four inches below the trochanter. Jenner reports a similar case. Neugebauer found ten glands on one person.

Contrary to popular opinion, polymastia is a frequent abnormality. Bruce, in the examination of 4,000 cases, male and female, found 67 cases of supernumerary breasts, or one and one-half per cent, and according to his paper males are oftener affected than females in proportion of four to one. But these statistics are opposed by the analysis of Godfrain and other observers. The rate of occurrence of the abnormality of the breasts is placed at one in five hundred (Leichtenstern). Mulattos and negroes are oftener affected than the white race.

During my service at the St. Louis Female Hospital, where I had under observation over five hundred cases of pregnant women, I never met with the abnormality. Recently I have had two cases in a short time.

On Sept. 14, I delivered Mrs. C. at full term; confinement normal throughout. On the second day of her confinement, she complained of a painful lump above the right breast. On examination, I found a sausage shaped tumor about 4 inches long, extending from above the upper and outer quadrant of the right breast, along the border of the great pectoral muscle. The affair was firm, elastic, covered by normal skin, freely movable and painful to the touch. My first impression was that I had to deal with a fatty tumor, so much did the mass resemble it. Careful inquiry excluded any lymphatic enlargement. The day following showed a fluctuating mass, still painful and swollen. On massaging the breast the tumor disappeared only to reappear when the breast became distended, and then it only caused slight discomfort. Careful palpation did not reveal any connection with the normal breast. Recent examination shows all tissues to be soft and no swelling present.

Mrs. W. referred to me last May by Dr. Frank Glasgow. Examina-

tion then showed pregnancy advanced to the fourth month. About September 12th she came to my office complaining of a lump under her left arm. Examination showed a hard mass, the size of an egg slightly movable, painful to the touch and covered with reddened skin. No local cause could be assigned nor was there any evidence of a recent infection. I remained in ignorance as to the true nature of the affair until the third day after her confinement, (Oct. 20), when the mass became greatly distended, with the advent of milk in the normal breasts. It extended from above the left breast under the border of the pectoralis major muscle high into the axilla and causing the arm to be raised at an angle; it was freely movable, firm and elastic in the lower part, fluctuating in the upper part, tender, and covered by reddened skin. Had I not seen the other case, I would have opened the fluctuating mass. This tumor did not disappear upon nursing or massaging the breast, but in a few days became softer and gave no trouble. Careful palpation revealed fibrous tissue extending nearly to the outline of the normal breast, but I could not be sure of any direct connection with the normal breast tissue.

My associate Dr. Pitman related the following case to me: Last August, he delivered Mrs. G— and on the third day a large fluctuating mass appeared under her left arm, which disappeared when the child suckled, only to re-appear when the breasts again filled up. This was her third confinement, and in the two previous ones she had the same mass under her arm. In none of the cases could any hereditary history be obtained.

Craighill Baltimore reports a case with a tumor under each arm, the size of a lemon, and the tip surrounded with areola which felt like ordinary gland tissue.

Fuller (Extract). Author states that elevations without nipples should give suspicion of mammary glands. Cites the case of a married woman twenty-two years old who consulted him in the early part of her pregnancy, about a small swelling under each arm. When she was delivered the swelling under the left arm resembled a normal breast, and during lactation was more enlarged. On the right side, when the child would suckle the tumor would disappear. The mass on the left side was aspirated and milk found.

Hirst (Extract) "In a certain number of cases, I have seen a swelling appear in both breasts of a puerperal woman, which closely simulates an abscess, but is caused by the formation and retention of milk in accessory mammary tissue, placed in that locality.

These swellings are painful, tender to the touch, covered with normal or pink skin, and often divided in two parts by a sulcus. They may show a distinct fluctuation, and the first time I observed the swelling I came near plunging a biscutory into them, but by means of a hypodermic syringe I satisfied myself that they

contained only pure milk; in spite of the most careful palpation I have not been able to feel any connection between them and the mammary gland. I have never seen them suppurate."

Of the greatest importance is a differential diagnosis between partially developed glands, situated in a locality, often the site of lymphatic glandular swellings and other disturbances, whence confusion may arise. A careful study of the history of the case, the absence of general lymphatic disease, the absence of any avenue of recent infection will suffice to exclude lymphatic glandular disturbance.

Milk retention is differentiated from abscess formations by the absence of heat, etc. If any doubt should arise aspiration will settle the question. In no way could a galactocoele be confounded with this condition, unless seen late. It is well to remember that nearly all misplaced gland tissue functionate in part during lactation.

Treatment. — These conditions when found, should be let alone, unless by their position they cause disturbance to the normal functions of the patient. When the patient is physically affected, removal is justifiable. Should the milk retention cyst become infected it should be opened and drained as is done in any other abscess.

Meeting of December 13th.

The annual meeting and dinner of the St. Louis County Medical Society was held at the Mercantile Club, St. Louis, Wednesday evening, December 13th.

The following members were present: H. G. Wyer, Hinton Armstrong, Harry B. Gneensfelder, Fayette C. Ewing, Howard Carter, C. L. Armstrong, F. E. Guibor, S. H. Reyholds, W. L. Townsend, L. W. Cape, H. T. Randle, O. W. Koch, N. N. Jensen, J. C. Gallagher, J. M. Berry, E. J. Thurman, R. B. Denny, R. D. Moore.

The society was honored by the presence as guests of Dr. C. M. Nicholson, Secretary of the Missouri State Medical Association and Drs. R. M. Funkhouser and S. B. Brossard.

After an enjoyable dinner the society was called to order by President Wyer. Minutes of previous meeting were read and approved.

The report of Committee on Revision of Constitution and By-laws was read by the chairman, Howard Carter, it being the pleasure of the society to hear each section and article read and approved separately. The new Constitution and By-laws, presented by the Committee, are in accord with those promulgated by the State Medical Association for County Societies. They were practically adopted as read, a few exceptions being laid over to be considered at next regular meeting. The society received the application for membership of Dr. Brossard of Maplewood.

Election of officers followed: Howard Carter, president, F. E. Guibor, vice-president; R. D. Moore,

secretary and treasurer.

The scientific program consisted of a paper by R. D. Moore entitled, "The Patent and Proprietary Nostrum Evil."

Dr. Moore stated that his paper was chiefly a collection of editorials taken from various medical journals, with a few remarks and suggestions sandwiched between. He called attention to the work being done in exposition of patent medicine frauds by S. H. Adams, in *Collier's Weekly* and Wm. Bok, editor of *The Ladies' Home Journal.* (See December issue MISSOURI STATE JOURNAL). While the work is greatly appreciated and endorsed by the medical profession at large, we must, before we can consistently wage war, eradicate the nostrum evil, which has flourished in our midst, fostered and upheld by a mercenary medical press. There is practically little difference between the nostrums exploited to the laity by the press, always ready to grab such advertising, and that advertised to physicians in medical journals. The essayist spoke of the work done by the Council of Pharmacy and Chemistry of the American Medical Association, its origin, purpose and result of its investigations as published in the *Journal of the American Medical Association.* The council is something more than a body to which to refer matters regarding the ethical character of medicines offered for advertisement. Its object is to investigate all medicinal preparations that are offered to the medical profession, and to approve those that come up to the standard acquired by its rules.

It proposes to publish in book form annually a list of preparations not in the U. S. Pharmacopeia that are approved by the Council. If you have sufficient confidence in the Council to accept results of its work in the book "New and Non-Official Remedies," one may have a ready reference book for medicines worthy of patronage and non-secret in character. The report on the acetanilid mixture was read (See *Journal American Medical Association*, June 3rd, 1905).

The publication of several advertisements in the JOURNAL OF THE MISSOURI STATE MEDICAL ASSOCIATION, appear to be not in accord with resolutions adopted by the State Association at the last meeting. Several preparations are advertised, printing an indefinite formula, a negative formula or none at all. The remedy necessary to eradicate this evil lies with the physician himself. The teaching of pharmacognosy and pharmacy in most medical colleges is not as thorough as it should be. Graduates should have a better knowledge of prescription writing.

If the U. S. Pharmacopeia was carefully studied there would be less proprietary medicine prescribed. It is ont only lowering professional dignity, but is an injustice to patient to prescribe for him some preparation whose formula is partially or entirely unknown. Nostrums should be replaced by strictly ethical prescription writing, with mutual ben-

efit to all concerned.

DISCUSSION.

Dr. R. M. Funkhouser agreed with the writer and spoke of objectionable advertisements appearing in the daily papers, such as "Lost man-hood, self-abuse, monthly regulators, venereal diseases, etc," in violation of Revised Ordinance, 1892, sec. 988, City of St. Louis (See JOURNAL MISSOURI STATE MEDICAL ASSOCIATION, December, 1905, page 346). He understood this matter was being investigated by legal authority for the St. Louis Medical Society.

Dr. C. M. Nicholson stated that several of the advertisements in the STATE JOURNAL referred to and criticised, had been considered by the publication committee, and that every remedy the formula of which was not known and printed in advertisements, had been ordered excluded from the advertising pages and would not appear after the expiration of contract.

Before adjourning, the following resolution was adopted: Resolved, That members of the St. Louis County Medical Society will not prescribe proprietary medicines, except those approved by the Council of Pharmacy and Chemistry of the American Medical Association, and will use instead medicines authorized by the U. S. Pharmacopeia.

R. D. MOORE, Reporter.

SHELBY COUNTY MEDICAL SOCIETY.

Dr. D. R. Corbin, President.
Dr. J. S. Montgomery, Secretary.

Shelby County Medical Society met in the office of Dr. Vaughan at Shelbina on December 19th.

Dr. Vaughan reported a case of asthma very successfully treated with adrenalin.

Dr. Dallas read a very interesting paper on skin grafting and described the technic used by him in a recent case of severe burn of large area. He said the first case he ever saw was done with much ceremony, a great display of paraphernalia and many assistants. In the case described by him he had treated the patient and placed the grafts without assistance and had obtained a good result. Grafting, he said, should always be done when a large area of skin had been burned or where a deformity was likely to result from injury.

The secretary was instructed to communicate with the state board of health and ascertain what steps are necessary in the proper procedure against certain itinerants who visit the county.

The time of meeting was changed from 8 p. m. to 10 a. m. Dr. R. E. Maupin and Dr. Singleton were elected to membership.

The following officers were elected

to serve during 1906: President, L. W. Dallas, Hunnewell; vice-president, J. D. Smith, Shelbina; secretary, A. M. Wood, Lentner; censor, R. E. Maupin, Shelbyville; delegate, Chas. Chapman, Shelbina.

This was one of the best meetings of the year, there being over one-half of the physicians in the county in attendance. After adjournment the members were tendered an oyster supper given by the ever generous and hospitable physicians of Shelbina.

A. M. Wood, Reporter.

STODDARD COUNTY MEDICAL SOCIETY.

Dr. R. C. Corbin, President.
Dr. John Ashley, Secretary.

The Stoddard County Medical Society met in regular session in Dowd's Hall at Dexter, on Wednesday, December 6th. The meeting was called to order by the president, the following members being present: Drs. T. C. Allen, John Ashley, L. Burris, D. R. Corbin, John Douglas, S. M. Evans, A. D. Hill, H. LaRue, Ed Moore, Geo. W. Vernon, T. B. Wingo and S. M. Winters.

The afternoon session was devoted to routine business and the election of officers for the ensuing year. The board of censors reported favorably on the application of Dr. Samuel West, of Idalia, and he was elected to membership. Several communications were read and either placed on file or referred to committees for action at a future meeting.

By unanimous vote it was decided to meet bi-monthly in future instead of quarterly. The dates of meetings will be the first Wednesday in January, March, May, July, September and November. The next meeting will be held in Bloomfield on January 3rd, 1906.

The election of officers resulted as follows: President, T. C. Corbin; vice-president, S. M. Winters; secretary, John Ashley; treasurer, S. M. Evans; reporter, Geo. W. Vernon; board of censors, S. M. Evans, one year, H. LaRue, two years, Ed Moore, three years.

Dr. Wingo, chairman of the committee on public health and legislation, reported progress and stated there was still much work for the committee to do before the desired ends could be accomplished.

At 6:30 p. m. the meeting adjourned and the visiting members were entertained at the "Jeffersonian" where a dinner had been prepared by the local members.

At 8 o'clock the society reconvened. Dr. Corbin reported several interesting cases of diphtheria. One of the patients died before a supply of antitoxin could be obtained but all the others recovered under treatment with antitoxin. A general discussion of diphtheria was then opened and most of the members took part.

Dr. Phillips was on the program to read a paper on Whooping Cough, but he was prevented from attending the meeting. Dr. LaRue

opened a general discussion on this subject and all of the members spoke of the disease and their experience in the treatment. It was generally agreed that fatalities in whooping cough were not due so much to the disease itself as to the complications; that careful nursing and suitable treatment to prevent complications were the most important features in the care of these cases.

GEO. W. VERNON, Reporter.

VERNON COUNTY MEDICAL SOCIETY.

Dr. E. A. Dulin, President.
Dr. T. B. Todd, Secretary.

At the annual meeting of Vernon County Medical Society, which was held on December 5th, the following officers were elected: President, E. A. Dulin, Nevada; vice-president, J. L. Truex, Milo; secretary-treasurer T. B. Bond, Richards; censor, J. Robt. Buchanan. Drs. Bohanon Buchanan and Jarvis were appointed as a committee on public health.

RETIRING ADDRESS OF THE PRESIDENT.

Gentlemen: This meeting closes the first year of this society, and its acts have passed into history. While the advantages gained and the permanent good accomplished may not appear to us lavish and abundant, I hope it is the beginning of an effort that will unite and elevate our profession in the county to that exalted position it deserves. In 1901 and 1902 the American Medical Association made provision for the organization of county societies, making them the basic unit from which all other societies are derived, making the eligibility of membership in state and national association depend upon membership in the county society, thus placing the possibility of individual membership in all societies in the hands of members of the profession with whom he associates and who are best acquainted with him professionally, intellectually and morally. If the county has within its limits doctors who are immoral or unethical, (as most counties have) their association with the honest, fair dealing doctors of their immediate vicinity, who are, I am glad to say, always largely in the majority, will either cause them to better their ways or stay out of organization and thus mark them both to the profession and the world at large.

You will occasionally find a man in active practice, with a good medical education and a goodly amount of natural ability and intelligence who can, and will do more to bring about discord within, and reproach upon the profession of which he is classed an honored member, than will the three card monte man or bunco steerer on civilized society; and I have not in view the irregular christian scientist, the magnetic healer or the bone doctor or any of that like; but the fellow who ought to be your neighbor, to work and operate harmoniously with you, increasing your confidence in every

member of the profession that he may engender a little for himself. But he takes advantage of every opportunity to speak sneeringly of you and volunteers information as to your lack of natural ability and scientific training. Or he meets you in consultation, heartily agrees with you and the method of treatment then takes the first chance in private to express doubts as to the advisability of continuing the treatment and intimates that it was about as much as could have been expected of you with your limited amount of knowledge any way. The doctor who will prostitute himself and the profession to which he claims to belong by doing the practice of well to do and influential families in a neighborhood at a reduced rate or as it is sometimes done for nothing, in return for their efforts in drumming him up a practice, is pretty well on a level with the one who tries to make capital out of all his cases by magnifying the condition and impressing upon the friends and relatives that he "was sent for just in time" and that it was mostimportant that they sent for him instead of any one else as he alone was in posession of the peculiar and specific remedies to exactly reach the case, and then encourage the interference of some long tongued woman to interfere with his neighbor in the next case until she gets the attending physi- in his place and pompously poses as the only doctor worthy of the name in the neighborhood, congratulates the friends on their good fortune in calling him when the patient gets well and lamenting that he was not called sooner if he dies.

When a doctor ventures to speak sneeringly or lament the lack of scientific training of another to the public he is dealing with a proposition that will sooner or later reflect upon himself for the reason that all have their friends and all receive their rights and privileges to practice from the same source and that is about as far as the ordinary citizen can judge, the community viewing the matter without prejudice can't see a very great amount of difference and the doctor originating a controversy of this character in his community is very likely to get the worst of it before he is through. The hypocrite who agrees in consultation with you and takes advantage of the first opportunity to express doubt as to your course of treatment and scientific ability, may for a short time catch a few unimportant cases, but the intelligent, worthy, honest layman will see through the veiled subterfuge and both will likely fall in his estimation and there will possibly be a doubt planted against the whole profession. The doctor who will barter or trade his professional duties for drumming service places a very low estimate upon it and one that he can not blame the people for adopting. And they will not be slow in arriving at that conclusion and place the same value upon all his services and possibly that of all the profession.

As for the doctor who tries to im-

press his clientele in successful cases, that he was called just in time, or in fatal cases leave the impression that he was called too late and things might have been better had he been called a few hours sooner or even attempts continually to magnify his importance by enlarging upon the gravity of his cases and his special adaptation to those particular cases, his ability to treat them in a superior manner has adopted methods so transparent that it is soon observable by an intelligent community and are the most unbecoming acts a doctor can be guilty of except it be the one who succeeds a respectable competitor in a case and tries to impress upon them the serious mistake they made in not sending for him first. These peculiar characteristics whether adopted by a great number or just a few in a community, in that proportion effect the profession, limits the confidence and lowers the standing of its members.

The medical profession as an organization is like all other organizations, the closer the association of members in the same localities the better can you attain and accomplish ends desired. It has been said, and I will not stop here to deny it, that all doctors are possessed with these faults, many to a limited, and a few to a great extent. If that be true, the association of the many who are personally acquainted with each other's weaknesses, with an honest desire in their hearts to elevate and better their condition will not only succeed as to themselves but have a most wholesome effect on the few. I do not understand that these associations are to read scientific papers and study clinical cases alone, but to bring about a closer communion, afford the opportunity for cultivating a better acquaintance and unified effort to accomplish desired ends. The county association gives these opportunities, admits of our studying each others peculiar characteristics, lop off our faults, add to our virtues and thus, possibly grow into our ideal of what an honest, high minded, dignified, popular physician should be. Now there are about 56 physicians in Vernon county in active practice out of which 19 have joined the association. Every one in the county should be a member. I have written to many and talked to quite a number soliciting them to take membership and I hope in time all will see the great advantages of cooperation and fall in. Now in surrendering my position as president of the association I tender you my most grateful thanks for your efforts in trying to make it a success. As we move along, no doubt many conditions and propositions will present themselves that by united effort may be moulded to our advantage and interest without working any hardship upon the community. As we become better acquainted with each other we will understand our wants, desires, privileges and just demands and therefore be better able to cooperate. I would suggest that the incoming of-

ficers appoint three members in different parts of the county to make special effort in soliciting membership, explaining the advantages of association together and that special effort be made during the coming term to enlist every reputable member of the profession in the count. Again I thank you for the honor and hearty support you have given me.

Respectfully,
H. C. Jarvis.

WORTH COUNTY MEDICAL SOCIETY.

Dr. O. P. M. Mills, President.
Dr. J. K. Phipps, Secretary.

The Worth County Medical Society met at Grant City, December 13th, the president, Dr. O. P. M. Mills, in the chair. The minutes of the last meeting were read and approved. Members present: Drs. J. T. Smith, A. C. Long, W. E. McKinley, W. A. Robertson, H. P. Mills, O. P. M. Mills and J. K. Phipps.

This being the annual meeting the following officers were elected for the ensuing year: President, O. P. M. Mills; vice-president, N. P. Nesbit; secretary-treasurer, J. K. Phipps; delegate, W. E. McKinley.

On motion it was decided to have a banquet at the next regular meeting on January 10th, and invite some speaker of ability to be the guest of the society. All members of the profession in the county are invited to be present at the meetings.

J. K. Phipps, Secretary.

NEWS ITEMS.

Dr. A. J. Detweiler, bacteriologist to the state board of health, has resigned. He has moved to Hannibal where he will enter general practice.

Dr. S. P. Budgett has resigned the chair of physiology in Washington University and removed to California. Dr. Albert E. Taussig is filling the position temporarily.

The Alkaloidal Clinic makes announcement that, with the beginning of a new volume in January, the name of the journal will be changed to the *American Journal of Clinical Medicine*. The journal will remain under the able editorial management of Drs. Abbott and Waugh.

Nobel Prize Awards.—The Nobel prizes, each amounting to about $40,000, were distributed by King Oscar, at Stockholm, on December 10. The list includes the following: Physics: Philip Lenard, Professor at Kiel University, for researches into cathode rays. Chemistry:

Adolph von Boeyer, Professor at the University of Munich, for researches leading to the evolution of organic chemistry and the development of chemical industry. Medicine: Professor Robert Koch of Berlin, for researches on the prophylaxis of tuberculosis. Literature: Henryk Sienkiewicz.

A building permit has been issued to the St. Louis Medical Society, authorizing the erection of a one-story auditorium on ground leased from the St. Louis Medical Library Association at 3525 Pine street. The structure will be 44x52 feet, and will cost $7,000. Under the contract the building must be ready for occupancy by June 1st, 1906. This will make a splendid home for the society.

The crusade of the St. Louis Medical Society against patent medicines and quack advertising is beginning to bear fruit. A few days ago Dr. Nathaniel King was convicted in a police court of publishing indecent medical advertisements, and fined $50 and costs. Not one of the daily papers in St. Louis published the facts. The public should know how our great daily papers, for a few dollars, are willing to become party to, and aid in these great frauds. "The Mirror" was the only publication to take any notice of the case.

A number of druggists have been victimized recently in St. Louis by a man who gave bogus checks and impersonated a physician. The scheme followed by the man was to rush into a drug store, write a prescription hurriedly and ask to have it filled quickly. Then he would write a check, say he was Dr. Blank, and as the medicine was needed at once and he would take it with him. He would then give a check for $10 signed by the name of the physician he was impersonating and receive the balance in cash. The man was evidently familiar with prescription writing and succeeded in having several checks cashed by druggists.

St. Louis Obstetric Disjensary.—On December 14, 1905, the St. Louis Obstetric Dispensary was formally opened in its new quarters at 711 Carr street. This institution was founded in October, 1904, under the auspices of the St. Louis University and is at present maintained with funds provided by a Ladies Auxiliary Board, of which Mrs. Seth W. Cobb is the president and Mrs. A. V. Reyburn the treasurer.

A medical report just published by the physician in chief, Dr. Hugo Ehrenfest, analyzes the work done by the dispensary during the first thirteen months of its existence. Assistants and senior students on regular duty at the dispensary attended to 166 labor cases. In a speech made by the Health Commissioner, Dr. Snodgrass, during the opening ceremonies, the interesting fact was emphasized that this represents 1.4 per cent. of all confinement cases reported to the health authorities of St. Louis during the past year.

This fact certainly justifies the optimistic views expressed by all the speakers during the ceremony concerning the future of the St. Louis Obstetric Dispensary.

Preliminary programme of the tours of the American party attending the Fifteenth International Medical Congress to be held in Lisbon, in April, 1906.

As a large number of American physicians will attend the Fifteenth International Medical Congress, to be held in Lisbon, Portugal, April 19 to 26, 1906, the following itineraries have been arranged to enable the journey to be made with the maximum of comfort and enjoyment, at fixed inclusive fares. Tour A provides for a direct trip, with short visits to Seville and Gibraltar, in addition to the stay in Lisbon during the session of the Congress. A tour of 33 days. Inclusive fare $300.00.

Tour B presents an opportunity of enjoying *en route* the beauties and attractions of some of the most interesting cities of Spain, rich in Moorish remains, and a visit to Tangier, the fascinating chief seaport of Morocco. Inclusive fare $450.00.

Additional security, and consequently added pleasure, will be obtained by thus traveling as an associated party, with a conductor thoroughly conversant with the route, languages and customs of the countries to take charge of the details of travel.

The business arrangements of the tour have been placed, as before, in the hands of Thos. Cook & Son, the well-known Tourist Agents, which insures perfect and complete service for the trip, and relieves passengers from all troublesome details incident to foreign travel. Those delegates who attended the last Congress in Madrid, sailing from New York on the "Prinzess Irene" will remember the excellent service afforded them.

Dr. John H. Musser, Philadelphia, is Chairman of the National American Committee, and Dr. Ramon Guiteras, 75 West 55th street, New York City, is the Secretary, to whom all applications for membership in the Congress, and communications in regard to the presentation of papers should be addressed.

To Secure Membership.—Persons desirous of joining a party should send a New York draft or postal order for twenty-five dollars each, made payable to the order of Thos. Cook & Son, 261 Broadway, New York, who will at once return a Deposit Receipt, and a plan of the steamer, showing the location of the staterooms or berths allotted. Care should be taken to mention clearly which party the applicant desires to join. The full name and address of each person must also be given for registration.

The balance of amount due for membership is payable not later than three weeks before the departure of the party from New York.